


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 10, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F93000004111</b> 1. Entity Name <b>HENDRY INVESTMENTS, INC.</b>	
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Principal Place of Business <b>402 EAST RAMSEY ROAD SAN ANTONIO, TX 78216</b>	Mailing Address <b>402 EAST RAMSEY ROAD SAN ANTONIO, TX 78216</b>
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

**KELLY, PETER J  
100 SOUTH ASHLEY DRIVE  
TAMPA, FL 33602**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<del>U00000073372</del> <del>03/03/04-80050-011 150.00</del>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CH HENDRY, JOHN L III 402 EAST RAMSEY ROAD SAN ANTONIO, TX 78216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HENDRY, STUART 402 EAST RAMSEY ROAD SAN ANTONIO, TX 78216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDST HOOPER, CHARLES N 402 EAST RAMSEY ROAD SAN ANTONIO, TX 78216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DENTON, JAMES 402 EAST RAMSEY ROAD SAN ANTONIO, TX 78216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

U00000083012  
03/10/04-80022-011 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **Charles Hooper, SVP** **02-16-04** **210-341-2227**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #