	n Phorii Conpona	
UNIFORM	BUSINESS REPORT	(UBF

DOCUMENT # F95000000016 1. Entity Name HENDERSON, YOUNG & COMPANY, INC.



FILED Apr 07, 2003 8:00 a	m
Apr 07, 2003 8:00 a Secretary of State 04-07-2003 90188 028 ***150.00	

				1	- 15 S				
16700 NE 79T Suite 202	Principal Place of Business Mailing Address 16700 NE 79TH ST 16700 NE 79TH ST SUITE 202 REDMON WA 98052 REDMON WA 98052								
2. Principal F	Place of Business	3. Mail	ling Address	<u> </u>		1		00)XI 041X 00)XI 06171	1101 1 1 111 1111
8060 165th Ave. NE 8060 165th Ave			e. NE						
Suite, Apt. #, etc. Suit		Suite	Suite, Apt. #, etc. Suite 220			CHECK HERE IF MAKING CHANGES			
City & Sta Redmor		City & State Redmond, WA				4, F	4. FEI Number 84-0780133 Applied For Not Applicable		
Zip 98052	Country	Zip 980		Country			Certificate of Status Desired	Fee Require	
	6. Name and Address of Current	Registere	d Agent			7. N	lame and Address of New Regist	ered Agent	
BIIDNS C	HDISTINE			Name	,		,	•	
Burns, Christine 34911 US HWY 19 North			Street	eet Address (P.O. Box Number is Not Acceptable)					
SUITE 525	•			Į.					ł
PALM HAP	RBOR-FL-34684	it spirite Latin	Min The	City		5 44 m	A CONTRACTOR OF THE PROPERTY OF	Zip Coc	ie
	named entity submits this statement fo			egistered office	or registere	ed age	ent, or both, in the State of Florida.	l am familiar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent a	and title if appli	icable. (NOTE:	Registered Agent sign	nature required v	when reir	nstaling) {	DATE	
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 Beyable to Florida Department of	State					Election Campaign Financin Trust Fund Contribution.		May Be
10.	OFFICERS AND	DIRECTOR		11.		ADE	DITIONS/CHANGES TO OFFICERS	S AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	YOUNG, RANDALL L 16700 NE 79TH ST, SUITE 202 REDMON WA 98052	-	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3		65th Ave NE 1, WA 98052	Change	☐ Addition
TITLE	ST		□ Delete	TITLE				(D) Change	Addition
NAME STREET ADDRESS	YOUNG, SHARON L 16700 NE 79TH ST, SUITE 202 REDMON WA 98052	ŧ	_ butte	NAME STREET ADDRESS CITY-ST-ZIP			65th Ave NE d, WA 98052	ag ondigo	
STREET ADDRESS	V HENDERSON, WILLIAM P 16700 NE 79TH ST, SUITE 202 REDMON WA 98052		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		55th Ave NE 1, WA 98052	L Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AODRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition

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:

\$1,4/4/03 (425) 869-1786

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone # Date