SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT

1995 7-25-95 B-7826-C

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J31574 (3)

1. Corporation Name
HENWEL, INC.

FILED
95 JUL 25 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
2594 BENTLEY DRIVE PALM HARBOR FL 34684	2594 BENTLEY DRIVE PALM HARBOR FL 34684

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/04/1986
3a. Date of Last Report: 08/09/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 59-2719002 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

FOX, GREGORY A., ESQ.
~~2380 DREW STREET~~ 2850 U.S. 19 North
~~SUITE 3~~ Suite 100
CLEARWATER FL ~~33575~~ 34621

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PST	11 TITLE	DIRECTOR (Chairman), CEO	☐ Change ☑ Addition
NAME	HENDRIX, JOHN	12 NAME	John L. Hendrix	
STREET ADDRESS	2594 BENTLEY DR.	13 STREET ADDRESS	2594 Bentley Dr.	
CITY ST ZIP	PALM HARBOR FL	14 CITY ST ZIP	Palm Harbor, FL 34684	
TITLE		21 TITLE	Director	☐ Change ☑ Addition
NAME		22 NAME	James Lavan	
STREET ADDRESS		23 STREET ADDRESS	4309 N. Pontatoc Rd.	
CITY ST ZIP		24 CITY ST ZIP	Tucson, AZ 85718	
TITLE		31 TITLE	Director	☐ Change ☑ Addition
NAME		32 NAME	Roger Wilborn	
STREET ADDRESS		33 STREET ADDRESS	475 Sansome St., Suite 800	
CITY ST ZIP		34 CITY ST ZIP	San Francisco, CA 94111	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John L. Hendrix, CEO — 7-20-95 — (813)789-3257
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OR AUTHORIZED OFFICER OR DIRECTOR — Date — Daytime Phone #
John L. Hendrix

011995 1 CP