

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J71357

FILED
Apr 29, 2005
Secretary of State

Entity Name: HENDERSON PLUMBING, INC.

Current Principal Place of Business:

% JERRY RAY HENDERSON
209 LANG ROAD
FORT WALTON BEACH, FL 325473120

New Principal Place of Business:

Current Mailing Address:

% JERRY RAY HENDERSON
209 LANG ROAD
FORT WALTON BEACH, FL 325473120

New Mailing Address:

FEI Number: 59-2803057

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, JERRY RAY
200 MARICLE STRIP PKWY SW UNIT 402
FT. WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HENDERSON, JERRY RAY,
Address: 200 MARICLE STRIP PKWY SW UNIT 402
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: D () Delete
Name: HENDERSON, JERRY RAY,
Address: 712 BAYOU VIEW DRIVE
City-St-Zip: FORT WALTON BCH., FL

Title: S () Delete
Name: HENDERSON, BRENDA P
Address: 200 MARICLE STRIP PKWY SW UNIT 402
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VP () Delete
Name: HENDERSON, CHAD J
Address: 64 9TH AVE
City-St-Zip: SHALIMAR, FL 32579

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANA S REYNOLDS

CPA

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date