## 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# M81745

4339 ROOSEVELT BLVD, SUITE 400

JACKSONVILLE, FL 32210

Address:

City-St-Zip:

FILED Nov 17, 2006 Secretary of State

Entity Name: HENRY'S HICKORY HOUSE, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	LAND STREET VILLE, FL 32204	US	4339 ROOSEVELT BO SUITE 400 JACKSONVILLE, FL 3		
Current Ma	ailing Address:		New Mailing Address	New Mailing Address:	
P.O. BOX 2 JACKSON\	2823 VILLE, FL 32203	s US	4339 ROOSEVELT BO SUITE 40 JACKSONVILLE, FL 3		
FEI Number:	59-2896250	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
MORRIS, WILLIAM H PRES 4339 ROOSEVELT BLVD.,. 400 JACKSONVILLE, FL 32204 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,					
in the State		omits this statement for the p	urpose of changing its registered	d oπice or registered agent, or both,	
SIGNATURE: WILLIAM H. MORRIS					
Electronic Signature of Registered Agent				Date	
	,	)(b), F.S., the corporation did no rust Fund Contribution (  ).	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PS () De MORRIS, WILLIAN 4339 ROOSEVELT JACKSONVILLE, F	ЛН., ГBVLD, SUITE 400	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () De MORRIS, WILLIAN 4339 ROOSEVELT JACKSONVILLE, F	/I H., Г BVLD, SUITE 400	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D () De	elete	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: WILLIAM H. MORRIS **PRES** 11/17/2006