

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M81745

FILED
Apr 30, 2008
Secretary of State

Entity Name: HENRY'S HICKORY HOUSE, INC.

Current Principal Place of Business:

4339 ROOSEVELT BOULEVARD
SUITE 400
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

4339 ROOSEVELT BOULEVARD
SUITE 40
JACKSONVILLE, FL 32210 US

New Mailing Address:

FEI Number: 59-2896250

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, WILLIAM H PRES
4339 ROOSEVELT BLVD.,.
400
JACKSONVILLE, FL 32204 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: PS () Delete
Name: MORRIS, WILLIAM H CEO
Address: 4339 ROOSEVELT BLVD, SUITE 400
City-St-Zip: JACKSONVILLE, FL 32210

Title: MGR () Delete
Name: COON, STEVEN L COO
Address: 4339 ROOSEVELT BLVD, SUITE 400
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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.

SIGNATURE: WILLIAM H MORRIS

PS

04/30/2008

Electronic Signature of Signing Officer or Director

Date