2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18465

FILED Feb 01, 2008 Secretary of State

Entity Name: THE HENRY FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

324 SOUTH BEACH ROAD HOBE SOUND, FL 33455 US

Current Mailing Address: New Mailing Address:

1990 M STREET NW STE 250 WASHINGTON, DC 20036 US

FEI Number: 59-2827461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WOLCOTT, HENRY C III MCKELVY, NANCY H
324 SOUTH BEACH ROAD
HOBE SOUND, FL 33455 US MCKELVY, NANCY H
324 SOUTH BEACH ROAD
HOBE SOUND, FL 33455 US

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: NANCY H. MCKELVY 02/01/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change() Addition

 Name:
 HENRY, C. WOLCOTT, I, II
 Name:

 Address:
 1990 M STREET NW STE 250
 Address:

 City-St-Zip:
 WASHINGTON, DC 20036
 City-St-Zip:

Title: DT () Delete Title: () Change () Addition

 Name:
 HENRY, H. ALEXANDER,
 Name:

 Address:
 1990 M STREET NW STE 250
 Address:

 City-St-Zip:
 WASHINGTON, DC 20036
 City-St-Zip:

Title: DS () Delete Title: DS (X) Change () Addition

 Name:
 MCKELVY, NANCY H
 Name:
 MCKELVY, NANCY H

 Address:
 1990 M STREET NW STE 250
 Address:
 324 SOUTH BEACH RD

 City-St-Zip:
 WASHINGTON, DC 20036
 City-St-Zip:
 HOBE SOUND, FL 33455

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: C. WOLCOTT HENRY, III PD 02/01/2008