2001 UNIFORM BUS		RT (UBR)	
DOCUMENT # P00000 1. Entity Name THE HENDERSON GROUP, INC.	098022	A.	FILEU DECRETARY OF STATE DIVISION OF CORPORATIO.
			№ 01 SEP 21 AM 10: 27
Principal Place of Business 1423 GOLFSIDE DR WINTER PARK FL 32792	Mailing Address 127 W FAIRBANKS AVE. #20 WINTER PARK FL 32789	34	977870
2. Principal Place of Business	3. Mailing Address	0 001 10	
Suite, Apt. #, etc.	1423 GOLP Siz	oe prive	DO NOT WRITE IN THIS SPACE
City & State	City & State Winter Pari	t FL	4. FEI Number Applied For Not Applied be
Zip Country	32797	Country USB	5. Certificate of Status Desired S8.75 Additional Fee Required
6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent
HENDERSON, JOSEPH M 1423 GOLFSIDE DR WINTER PARK FL 32792		<u> سریسیست</u> م ند : د	ss (P.O. Box Number is Not Acceptable)
V		City	FL Zip Code
SignATURE Signature, typed or protect name of registered agent 9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)	FILE NOW!!!	Registered Agent signature req	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
11. OFFICERS AND		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NTLE RESIDENT OSEPHNIFEND STREET ADDRESS 1413 GOLPSIDE F CHY-ST-ZP WINTER 15 10 10 10 10 10 10 10 10 10 10 10 10 10	CRSON CRSON	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE VICE PRESIDENT NAME STREET ADDRESS CITY-ST-ZIP WINNER PARK	SCCY Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	Delete	NAME STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Deletæ	TÍTLÉ NAME STREET ADORESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Addition Change Addition
TITLE	□ Delete	TITLE	Change Addition

STREET ADDRESS CIFY-ST-ZIP

13. I hereby certify that the Information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

Attachment gorsov # POXXXXXXXX

HENDERSON GROUP, INC 1423 GOLFSIDE DRIVE WINTER PARK, FL 32792

August 1, 2001

Florida Department of State Division of Corporations Uniform Business Reports

Dear Sir / Madam:

Please file my business report. Enclosed is a check for \$150.00 for the filing fee. I did not receive my notice on time to file, it had been sent to a mail reception service and not delivered to my home. I have changed the mailing address on the enclosed form so that I will receive all correspondence on time. Thank you for your consideration in this matter.

Sincerely,

Joseph M. Henderson