

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000072586

FILED
Jan 08, 2009
Secretary of State

Entity Name: BECKNO & HENDRICKS, INC.

Current Principal Place of Business:

24 DOCKSIDE LANE
PMB 32
NORTH KEY LARGO, FL 33037

New Principal Place of Business:

14 BARRACUDA LANE
NORTH KEY LARGO, FL 33037

Current Mailing Address:

24 DOCKSIDE LANE
PMB 32
NORTH KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 76-0702194 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKNO, JOHN N
15445 SW 111TH LANE
MIAMI, FL 33196 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: D () Delete
Name: BECKNO, JOHN N
Address: 15445 SW 111TH LANE
City-St-Zip: MIAMI, FL 33196

Title: D () Delete
Name: HENDRICKS, VERNON L
Address: 9991 S.W. 145TH STREET
City-St-Zip: MIAMI, FL 33176

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: JOHN NEIL BECKNO

P

01/08/2009

Electronic Signature of Signing Officer or Director

Date