

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000083445

FILED
Jul 05, 2004
Secretary of State

Entity Name: HENSON INC.

Current Principal Place of Business:

2200 GABRIAL AVENUE
ORANGE PARK, FL 32073

New Principal Place of Business:

Current Mailing Address:

2200 GABRIAL AVENUE
ORANGE PARK, FL 32073

New Mailing Address:

FEI Number: 50-0011833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENSON, JAMES
8609 KNIGHTSBRIDGE CIR E
ORANGE PARK, FL 32073

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HENSON, JAMES
Address: 8609 KNIGHTSBRIDGE CIR E
City-St-Zip: ORANGE PARK, FL 32073

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HENSON, JAMES
Address: 7314 N HIGH BLUFF RD
City-St-Zip: JACKSONVILLE, FL 32244

Title: V () Change (X) Addition
Name: DAVID, HENSON
Address: 2200 GABRIAL AVE
City-St-Zip: ORANGE PARK, FL 32073

Title: V () Change (X) Addition
Name: DAVID, HENSON C
Address: 8619 BOXBERRY LANE
City-St-Zip: JACKSONVILLE, FL 32244

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES HENSON

P

07/05/2004

Electronic Signature of Signing Officer or Director

Date