



2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 24, 2004 8:00 am
Secretary of State

03-03-2004 90004 034 ***150.00

DOCUMENT # P03000094363 1. Entity Name WENDY F. HANSON, INC.																													
Principal Place of Business 8881 SE WATER OAK PLACE TEQUESTA FL 33469			Mailing Address 8881 SE WATER OAK PLACE TEQUESTA FL 33469																										
2. Principal Place of Business Suite, Apt. #, etc. <i>as above</i> City & State <i>same as above</i> Zip <i>as above</i>		3. Mailing Address Suite, Apt. #, etc. <i>same as above</i> City & State <i>same as above</i> Zip <i>as above</i>		 MOORE CR2E034 (11/03)																									
4. FEI Number 54-2127608				Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent HANSON, WENDY F. 8881 SE WATER OAK PLACE TEQUESTA FL 33469																									
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>[Signature]</i> DATE 2-18-04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																													
SIGNATURE: <i>[Signature]</i>				Date 2-18-04 Daytime Phone # 561-575-3779																									