

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000099872

FILED
Apr 23, 2008
Secretary of State

Entity Name: HENDERSON CONTRACTING, INC.

Current Principal Place of Business:

2075 SUNNYDALE BLVD.
SUITE B
CLEARWATER, FL 33765 US

Current Mailing Address:

2075 SUNNYDALE BLVD.
SUITE B
CLEARWATER, FL 33765 US

New Principal Place of Business:

2219 CATHEDRAL DRIVE
OFFICE
PALM HARBOR, FL 34683 US

New Mailing Address:

2219 CATHEDRAL DRIVE
OFFICE
PALM HARBOR, FL 34683 US

FEI Number: 20-0219587

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, EDWIN JOSEPH
2219 CATHEDRAL DRIVE
PALM HARBOR, FL 34683 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: HENDERSON, EDWIN JOSEPH
Address: 2219 CATHEDRAL DRIVE
City-St-Zip: PALM HARBOR, FL 34683 US

Title: D (X) Delete
Name: WALLACE, JUSTIN
Address: 5052 POLAR DRIVE
City-St-Zip: HOLIDAY, FL 34690

Title: D () Delete
Name: GORDON, DENNIS J
Address: 10400 SHEFFIELD RD S
City-St-Zip: SPRINGHILL, FL 34608

Title: D () Delete
Name: DAVID, LAMY
Address: 6242 28TH TERRACE N
City-St-Zip: ST. PETERSBURG, FL 33710

Title: D () Delete
Name: MILLER, RITA
Address: 2219 CATHEDRAL DRIVE
City-St-Zip: PAM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EDWIN JOSEPH HENDERSON

PRES

04/23/2008

Electronic Signature of Signing Officer or Director

Date