

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000115651

FILED
Mar 28, 2007
Secretary of State

Entity Name: HENDERSON-HARVEY, P.A.

Current Principal Place of Business:

12 STONE ST., SUITE 1
COCOA, FL 32922

New Principal Place of Business:

600 FLORIDA AVE, SUITE 204
COCOA, FL 32922

Current Mailing Address:

12 STONE ST., SUITE 1
COCOA, FL 32922

New Mailing Address:

600 FLORIDA AVE., SUITE 204
COCOA, FL 32922

FEI Number: 20-1436794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENDERSON, RHONDA
12 STONE ST., SUITE 1
COCOA, FL 32922 US

Name and Address of New Registered Agent:

HENDERSON, RHONDA
600 FLOIRDA AVE., SUITE 204
COCOA, FL 32922 US

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: RHONDA HENDERSON-HARVEY

03/28/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HENDERSON, RHONDA
Address: 12 STONE ST., SUITE 1
City-St-Zip: COCOA, FL 32922

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HENDERSON, RHONDA
Address: 600 FLORIDA AVE., SUITE 204
City-St-Zip: COCOA, FL 32922

I hereby certify that the information supplied with this filing does not qualify for the 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: RHONDA HENDERSON-HARVEY

D

03/28/2007

Electronic Signature of Signing Officer or Director

Date