

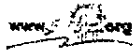
2013 FOR PROFIT CORPORATION ANNUAL REPORT

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13 MAR 19 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000050274			
1. Entity Name KYLE JO HENSON, P.A.			
Principal Place of Business 12031 ASTER AVENUE BRADENTON, FL 34212		Mailing Address 12031 ASTER AVENUE BRADENTON, FL 34212	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 20-2635765		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HENSON, KYLE J 12031 ASTER AVE BRADENTON, FL 34212		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 _____ (NOTE: Registered Agent Signature required when reinstating)			
FILE NOW!!! FEE IS \$550.00 Due by September 27, 2013		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 13	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P HENSON, KYLE J 12031 ASTER AVE BRADENTON, FL 34212 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	200253396212 10/31/13-01002-004 **150.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VP HENSON, TERRI 12031 ASTER AVENUE BRADENTON, FL 34212 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Kyle Henson</u> 10/24/13		E-MAIL ADDRESS: <u>Team.henson@gmail.com</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		DATE	



Corporations

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TALLAHASSEE, FLORIDA

Annual Report Filing History

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Session

Transaction ID	Description	Filing Stage
p05000050274-544b660b-6f83-459c-ad3e-bf794828e1f4	Session file for P05000050274 with last modified date of 3/19/2013 9:40:47 AM Eastern Standard Time	Edit
p05000050274-9d540734-f4f1-4856-9e96-8e6bb42b079a	Session file for P05000050274 with last modified date of 3/26/2013 2:19:26 PM Eastern Standard Time	PaymentPage

Transactions

Transaction Id	Document Id	Filing Fee	Filing Status	Filing Date
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p05000050274-9d540734-f4f1-4856-9e96-8e6bb42b079a	P05000050274	150	0	3/26/2013 2:19:29 PM

