FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P9600000537 (6) DOCUMENT

THE HENDERSON GARDENS COMPANY

FILED May 14 1998 8:00am Secretary of State



Mailing Address Principal Place of Business 2778 OUAIL HOLLOW RD 1213 CLEVELAND STREET CLEARWATER FL 34621 CLEARWATER FL 34615 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/02/1996 Ba. Mailing Address 4. FEI Number Applied For 59-3351908 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Ζip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent MARK H WILKINS 2778 QUAIL HOLLOW ROAD, W Street Address (P.O. Box Number is Not Acceptable) 82 CLEARWATER FL 34621 **B3** 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title diapplicable (NOTF: Registered Agent signature required when reinstating) (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. **VPSD** Change Addition TITLE 1.1 TITLE P/s/D TIM ANDREYKA 12 NAME **25E034** NAME MARK WILKINS 30 ST CLAIRE LANE 2778 QUAIL Hollow Road, W. STREET ADDRESS 1.3 STREET ADDRESS ATLANTA GA 30324 Clearwater, FL 33761 CITY-ST-ZIP 1.4 CITY - ST- ZIP Change DELETE Addition TITLE 2.1 TITLE TIM ANDLYKA 30 ST. CLAIRE LANE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS ATLAUTA, GA 30324 2 4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME Rhonda WILKIUS 2778 Quail Hollow Rd. W. STREET ADDRESS **3.3 STREET ADDRESS** Clearwater, FL 33761 Change CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-S1-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. 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 annual report or suppliemental aircual 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 12 or Block 13 if changed, or on an attachment with an address. 1 Lee

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