

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

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000014363 (1)

1. Corporation Name
HANSEN CONSULTING GROUP, INC.

Principal Place of Business
423 RALPH ST
ORANGE PARK FL 32073

Mailing Address
PO BOX 66
ORANGE PARK FL 32067-0066



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 423 RALPH ST Suite, Apt. #, etc. 22 City & State 23 ORANGE PARK, FL Zip 24 32073 Country 25 USA		2a. Mailing Address 26 PO Box 66 Suite, Apt. #, etc. 27 City & State 28 ORANGE PARK, FL Zip 29 32067-0066 Country 30 USA		3. Date Incorporated or Qualified 02/14/1996	
9. Name and Address of Current Registered Agent HANSEN, CHRISTOPHER E 406 SILVER WING CIR. ORANGE PARK FL 32073		10. Name and Address of New Registered Agent 81 Name HANSEN, ERIC 82 Street Address (P.O. Box Number is Not Acceptable) 423 RALPH ST 83 PO BOX 66 84 City ORANGE PARK FL 85 Zip Code 32073		4. FEI Number 59-3362515 Applied For Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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 607.0502 of Florida Statutes.

SIGNATURE *Eric Hansen* President DATE 4/27/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP HANSEN, CHRISTOPHER E 406 SILVER WING CIR. ORANGE PARK FL 32073	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	DV HANSEN, ERIC P.O. BOX 658 ISLE OF PALMS SC 29451	2.1 TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	423 RALPH ST
CITY-ST-ZIP		2.4 CITY-ST-ZIP	ORANGE PARK, FL 32073
TITLE	DT HANSEN, BARBARA 406 SILVER WING CIR. ORANGE PARK FL 32073	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 supplemental annual 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.

SIGNATURE: *Eric Hansen* President DATE 4/27/98 904-215-9928

CR2E034 (10/97)