

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 09, 2002 8:00 am**  
**Secretary of State**

07-09-2002 90374 001 \*\*\*150.00

**DOCUMENT #** P96000091416

**1. Entity Name**

HENDERSON BROTHERS, INC.

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

10002 PRINCESS PALM AVE

Suite, Apt. #, etc.

SUITE 336

City & State

TAMPA, FL

Zip

33619

Country

**3. Mailing Address**

10002 PRINCESS PALM AVE

Suite, Apt. #, etc.

SUITE 336

City & State

TAMPA, FL

Zip

33619

Country

**4. FEI Number**

59-3489952

**Applied For**

**Not Applicable**

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**7. Name and Address of Current Registered Agent**

**Name**

HENDERSON, FRANK M JR

**Street Address (P.O. Box Number is Not Acceptable)**

2816 FOUNTAIN BLVD WEST

**City**

TAMPA

**FL**

**Zip Code**

33609

**DO NOT WRITE  
IN THIS SPACE**

**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.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**9. This corporation is eligible to satisfy its Intangible**

**Tax filing requirement and elects to do so.** ☐

(See criteria on back)

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$81.25**

**Make Check Payable to Department of State**

**10. Election Campaign Financing**  
**Trust Fund Contribution.** ☐

**\$5.00 May Be**  
**Added to Fees**

**11. OFFICERS AND DIRECTORS**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**  
P  
HENDERSON, ALLEN E  
4520 WEST WOODMERE ROAD  
TAMPA, FL 33609

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**  
VP  
HENDERSON, FRANK M JR  
2816 FOUNTAIN BLVD W  
TAMPA, FL 33609

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

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IN THIS SPACE**

**13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), 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 11 or on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Date**

**Daytime Phone #**

7/3/02 813-623-6763



Attachment

# Henderson Brothers/Brandon, LLC

*An independently owned and operated building company doing business as Inland Homes®*

# P96000091416

July 2, 2002

Department of Corporations  
Post Office Box 1500  
Tallahassee, Florida 32302-1500

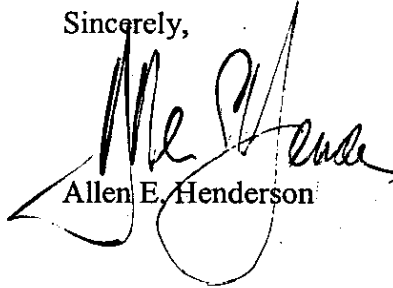
**RE: Henderson Brothers Inc.  
Form: 2002 UBR**

Dear Gentlemen:

We respectfully request that you abate the \$400.00 late filing penalty. We did not receive the 2002 UBR form in the mail. We have enclosed a check for \$150.00. Thank you for your consideration.

If you have any questions, please call.

Sincerely,

  
Allen E. Henderson