## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P97000036050

1. Entity Name

JOHN W. HENRY & COMPANY, INC.



Principal Place of Business

301 YAMATO ROAD

SUITE 2200

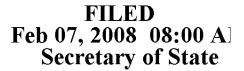
BOCA RATON, FL 33431-4931

Mailing Address

301 YAMATO ROAD

**SUITE 2200** 

BOCA RATON, FL 33431-4931





DO NOT WRITE IN THIS SPACE

01302008 No Chg-P CR2E034 (11/05)

4. FEI Number 95-3797166 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WEBSTER, KENNETH S 301 YAMATO ROAD SUITE 2200 BOCA RATON, FL 33431-4931 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.	I am familiar with, and accept
	the obligations of registered agent.	

SIGNATURE.

Signature, typed or printed name of registered agent and bite it applicable

(NOTE Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees U00000819224 02/15/08-80074-014 150.00

10. OFFICERS AND DIRECTORS D TITLE HENRY, JOHN W NAME STREET ADDRESS 301 YAMATO ROAD CITY-ST-ZIP BOCA RATON, FL 334314931 TITLE NAME MITCHELL, MARK H STREET ADDRESS 301 YAMATO ROAD CITY-ST-7IP BOCA RATON, FL 334314931 TITLE NAME TWIST, EDWIN B STREET ADDRESS 301 YAMATO ROAD CITY-ST-ZIP BOCA RATON, FL 334314931 TITLE SVP KOZAK, DAVID M NAME STREET ADDRESS 301 YAMATO RD BOCA RATON, FL 33431 CITY+ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. Thereby certify that the information supplied with this filling 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

2/4/08

561-241-0018

Date

Daytime Phone #