

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

08 MAR -4 PM 1:17

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # P97000075031

1. Entity Name
HENDERSON ELECTRIC, INC.



Principal Place of Business
**648-3A ANCHORS ST NW
FORT WALTON BEACH, FL 32548**

Mailing Address
**648-3A ANCHORS ST NW
FORT WALTON BEACH, FL 32548**



01082008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3467665

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HENDERSON, DOUGLAS E
648-3A ANCHORS ST NW
FORT WALTON BEACH, FL 32548**

**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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HENDERSON, DOUGLAS E
STREET ADDRESS	3 NEPTUNE CT
CITY - ST - ZIP	FT WALTON BEACH, FL 32548

TITLE	VD
NAME	HENDERSON, GLORIA
STREET ADDRESS	3 NEPTUNE CT
CITY - ST - ZIP	FT WALTON BEACH, FL 32548

TITLE	ST
NAME	HENDERSON, DOUGLAS E
STREET ADDRESS	3 NEPTUNE CT
CITY - ST - ZIP	FT WALTON BEACH, FL 32548

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

800120088788
03/12/08--01016--003 **600.00

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/08

Date

850-243-2223

Daytime Phone #