2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000076009 * * *

1. Entity Name

T. HÉNRY & ASSOCIATES, INC.



Mailing Address

12889 EMERALD COAST PKWY SUITE 111-A

Principal Place of Business

DESTIN, FL 32550

12889 EMERALD COAST PKWY SUITE 111-A DESTIN, FL 32550

FILED May 03, 2004 08:00 AN Secretary of State

CR2E034 (10/03)

Pee Required



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04122004 No Chg-P Applied For 4. FEI Number Not Applicable 59-3469344 \$8.75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

HENRY, THOMAS B JR. **724 HWY 98 EAST** #101 DESTIN, FL 32541

SIGNATURE:

DO NOT WRITE IN THIS SPACE

		1							
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 tille i	applicable. INCTE: Registered	Agent signature	required when reinstating)	DATE				
FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.			cing 🔲	\$5.00 May Be Added to Fees	U00000154404				
1D.	OFFICERS AND DIREC	TORS		· · · · · · · · · · · · · · · · · · ·	05704704-80165-017 150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HENRY, THOMAS B JR 724 HWY 98 EAST #101 DESTIN, FL 32541								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS HENRY, SUSAN J 724 HWY 98 EAST #101 DESTIN, FL 32541								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP HENRY, TODD R 4063 BURNING TREE DRIVE DESTIN, FL 32541			DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(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 cath, 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.									