


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 06, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000001808 1. Entity Name HANSEN DEVELOPMENT COMPANY	
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Principal Place of Business 1401 MORRIS ROAD BLUE BELL, PA 19422	Mailing Address 1401 MORRIS ROAD BLUE BELL, PA 19422
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DO NOT WRITE IN THIS SPACE



01072004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0813444	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**HANSEN, DENNIS
12058 82ND LANE NORTH
WEST PALM BEACH, FL 33412**

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HANSEN, ELMER F JR. 1401 MORRIS RD BLUE BELL, PA 19422
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP SHERMAN, DAVID S 1401 MORRIS ROAD BLUE BELL, PA 19422
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST HANSEN, ELMER F III 1401 MORRIS ROAD BLUE BELL, PA 19422
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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000000039242
02/06/04-80170-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **David S. Sherman** 215-616-8200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Vice President Date Daytime Phone #