2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 834037

Entity Name: ROY JORGENSEN ASSOCIATES, INC.

FILED Mar 02, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
P.O. BOX 70 BUCKEYSTOWN, MD 21717				3735 BUCKEYSTOWN PIKE BUCKEYSTOWN, MD 21717				
Current Mailing Address:				New Mailing Address:				
P.O. BOX BUCKEYS	70 STOWN, MD 2	21717		P.O. BOX 7 BUCKEYS	70 TOWN, MD	21717	00	
FEI Number	: 52-0850711	FEI Number Applied For()	FEI Nun	nber Not Appli	icable ()	Certifi	cate of Status [Desired (X)
Name and	Address of (Current Registered Agent:		Name and	Address of	New Re	gistered Ag	ent:
2731 EXEC SUITE 4 WESTON, The above	e of Florida.		urpose o	f changing it	ts registered	l office or	registered aç	gent, or both,
OIOINATOI		nic Signature of Registered Age	nt				Date	
Election Car		g Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	C (SELBY, DOUG 5107 GARLAN IJAMSVILLE, N	D COURT		Title: Name: Address: City-St-Zip:		()Change	e()Addition	
Title: Name: Address: City-St-Zip:	P (JORGENSEN, 3735 BUCKEY BUCKEYSTOV	STOWN PIKE		Title: Name: Address: City-St-Zip:		()Change	e () Addition	
Title: Name: Address: City-St-Zip:				Title: Name: Address: City-St-Zip:		()Change	e()Addition	
Title: Name: Address: City-St-Zip:	VP (CLARK, THOM 5834 ABERDA ADAMSTOWN,	AS S LE PLACE		Title: Name: Address: City-St-Zip:	SEC MORGAN, DO 6615 FOX M FREDERICK	ONNA M EADE COL		
Title: Name: Address: City-St-Zip:	SVP (MEYER, CHAR 12028 OAK DF WHITEWOOD,	RIVE		Title: Name: Address: City-St-Zip:	SVP MEYER, CHA 515 NORTH SPEARFISH,	ÀRLES E., RAINBOW		
Title: Name: Address: City-St-Zip:	VP (EDELBLUTE, 0 PO BOX 229 GREENBANK,			Title: Name: Address: City-St-Zip:		()Change	e()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOUGLAS W. SELBY C 03/02/2007