

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001536

FILED
Apr 26, 2007
Secretary of State

Entity Name: BORENSEN AND ASSOCIATES, INC.

Current Principal Place of Business:

330 SCHANTZ ROAD
ALLENTOWN, PA 18104

New Principal Place of Business:

330 SCHANTZ ROAD
ALLENTOWN, PA 18104 US

Current Mailing Address:

P.O. BOX 3328
ALLENTOWN, PA 18106

New Mailing Address:

P.O. BOX 3328
ALLENTOWN, PA 18106 US

FEI Number: 20-3946402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: BORENSEN, HENRY DR
Address: 330 SCHANTZ ROAD
City-St-Zip: ALLENTOWN, PA 18104

Title: P () Delete
Name: BORENSEN, HENRY DR
Address: 330 SCHANTZ ROAD
City-St-Zip: ALLENTOWN, PA 18104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM (X) Change () Addition
Name: BORENSEN, HENRY DR
Address: 330 SCHANTZ ROAD
City-St-Zip: ALLENTOWN, PA 18104 US

Title: PRES (X) Change () Addition
Name: BORENSEN, HENRY DR
Address: 330 SCHANTZ ROAD
City-St-Zip: ALLENTOWN, PA 18104 US

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: DR. HENRY BORENSEN

PRES

04/26/2007

Electronic Signature of Signing Officer or Director

_____ Date