

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14267

FILED
Apr 14, 2009
Secretary of State

Entity Name: JOHN E. TENGBLAD, C.L.U. AND ASSOCIATES, INC.

Current Principal Place of Business:

8065 SW 107TH AVENUE
SUITE 306
MIAMI, FL 33173 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 831267
MIAMI, FL 332831267 US

New Mailing Address:

FEI Number: 59-2059534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TENG BLAD, JOHN E
8065 SW 107 AVE, #306
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

TENGBLAD, JOHN E
8065 SW 107 AVE, #306
MIAMI, FL 33172 US

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: JOHN E. TENGBLAD, CLU

04/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TENGBLAD, JOHN E
Address: 8065 SW 107TH AVE., #306
City-St-Zip: MIAMI, FL 33173

Title: V () Delete
Name: MCCORMICK, MAUREEN T
Address: 235 RIDGE TERRACE
City-St-Zip: PARK RIDGE, IL 60068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SANDRA J. FOERTSCH

DP

04/14/2009

Electronic Signature of Signing Officer or Director

Date