2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005
Secretary of State

DOCUMENT# F97000006514

Entity Name: JENSEN CABINET, INC.

Current Principal Place of Business:

205 E MURRAY ST
FORT WAYNE, IN 46803 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 10599
FORT WAYNE, IN 46853 US

New Mailing Address:

FEI Number: 35-1424596 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PD ( ) Delete
Name: JENSEN, DENNIS
Address: 3530 KIRKLAND AVE
City-St-Zip: FORT WAYNE, IN

Title: V ( ) Delete
Name: DEDRICK, THOMAS
Address: 1617 NORTH ANTHONY
City-St-Zip: FORT WAYNE, IN

Title: ST ( ) Delete
Name: FRANKLIN, JANE
Address: 6732 LAURA LN
City-St-Zip: FORT WAYNE, IN

Title: VP ( ) Delete
Name: ROBERTSON, BRIAN
Address: 2336 COMPTON DRIVE
City-St-Zip: FORT WAYNE, IN 46815

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 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: JANE FRANKLIN ST 04/21/2005

Electronic Signature of Signing Officer or Director Date