2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT DOCUMENT\# 834037

Entity Name: ROY JORGENSEN ASSOCIATES, INC.

## Current Principal Place of Business:

3735 BUCKEYSTOWN PIKE
BUCKEYSTOWN, MD 21717

## Current Mailing Address:

P.O. BOX 70

BUCKEYSTOWN, MD 2171700
FEI Number: 52-0850711
Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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:
Electronic Signature of Registered Agent
Officer/Director Detail :

| Title | PRESIDENT | Title | SVP |
| :--- | :--- | :--- | :--- |
| Name | SELBY, DOUGLAS W | Name | HENNINGSGAARD, CHARLES E |
| Address | 204 MAGNOLIA AVENUE | Address | 10 HONEYSUCKLE COURT |
| City-State-Zip: | FREDERICK MD 21701 | City-State-Zip: | DAMASCUS MD |
| Title | SEC | Title | SVP |
| Name | MORGAN, DONNA M | Name | SULZER, RICHARD S |
| Address | 6615 FOX MEADE COURT | Address | 2209 SINCLAIR STREET |
| City-State-Zip: | FREDERICK MD 21702 | City-State-Zip: | CARROLLTON TX 75010 |
| Title | VP |  |  |
| Name | EDELBLUTE, CARL G |  |  |
| Address | PO BOX 229 |  |  |
| City-State-Zip: | GREENBANK WA 98253 |  |  |

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[^0]:    I hereby 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 all other like empowered.

