## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 368222** 

Entity Name: O.E. OLSEN & ASSOCIATES, INC.

FILED Jan 10, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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3342 TYRONE BLVD 51 S. MAIN AVENUE

ST PETERSBURG, FL 33710 SUITE 320

CLEARWATER, FL 33765

Current Mailing Address: New Mailing Address:

3342 TYRONE BLVD 51 S. MAIN AVENUE

ST PETERSBURG, FL 33710 SUITE 320

CLEARWATER, FL 33765

FEI Number: 59-1300155 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

OLSEN, ERIC P
3342 TYRONE BLVD.
51 S. MAIN AVENUE

ST PETERSBURG, FL 33710 US SUITE 320 CLEARWATER, FL 33765 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: ERIC P. OLSEN 01/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition

 Name:
 OLSEN, ERIC P
 Name:

 Address:
 2024 RAINBOW FARMS DR
 Address:

 City-St-Zip:
 SAFETY HARBOR, FL 34695
 City-St-Zip:

Title: STD () Delete Title: () Change () Addition

 Name:
 WOLF, DEBORAH A
 Name:

 Address:
 10864 101ST AVE N
 Address:

 City-St-Zip:
 SEMINOLE, FL 33772
 City-St-Zip:

Name: OLSEN, O E Name: OLSEN, O E

Address: 3600 OAK MANOR LANE, UNIT 19-60 Address: 7100 ULMERTON ROAD, LOT 753

City-St-Zip: LARGO, FL 33774 City-St-Zip: LARGO, FL 33771

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: ERIC P. OLSEN PD 01/10/2006