

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14267

FILED  
Mar 31, 2005  
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:**

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: 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 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:** JOHN E. TENGBLAD

DR

03/31/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date