

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000005997

FILED
Feb 14, 2007
Secretary of State

Entity Name: J.C. CHRISTENSEN & ASSOCIATES, INC.

Current Principal Place of Business:

215 N BENTON DRIVE
SAUK RAPIDS, MN 56379

New Principal Place of Business:

Current Mailing Address:

215 N BENTON DRIVE
SAUK RAPIDS, MN 56379

New Mailing Address:

FEI Number: 41-1243495

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: CEO () Delete
Name: CHRISTENSEN, JAMES C
Address: 215 N. BENTON DR.
City-St-Zip: SAUK RAPIDS, MN 56379

Title: VPD () Delete
Name: ENGBRETSON, CHARLES
Address: 215 N BENTON DRIVE
City-St-Zip: SAUK RAPIDS, MN 56379

Title: PD () Delete
Name: SCHMIT, MATTHEW
Address: 215 NORTH BENTON DRIVE
City-St-Zip: SAUK RAPIDS, MN 56379

Title: VP () Delete
Name: GILBERTSON, GERRY
Address: 215 N BENTON DR
City-St-Zip: SAUK RAPIDS, MN 56379

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SVPD (X) Change () Addition
Name: ENGBRETSON, CHARLES K
Address: 215 N BENTON DRIVE
City-St-Zip: SAUK RAPIDS, MN 56379

Title: PD (X) Change () Addition
Name: SCHMIT, MATTHEW A
Address: 215 NORTH BENTON DRIVE
City-St-Zip: SAUK RAPIDS, MN 56379

Title: VP (X) Change () Addition
Name: KOTTKE, MARK A
Address: 10330 REGENCY PARKWAY DRIVE, STE 202
City-St-Zip: OMAHA, NE 68114

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: CHARLES K. ENGBRETSON

SVPD

02/14/2007

Electronic Signature of Signing Officer or Director

Date