


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000002561	
1. Entity Name D. G. JOHNSEN INVESTMENTS, INC.	

Principal Place of Business 2099 PENNSYLVANIA AVE. NW SUITE 100 WASHINGTON, DC 20006	Mailing Address 2099 PENNSYLVANIA AVE. NW SUITE 100 WASHINGTON, DC 20006
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DO NOT WRITE IN THIS SPACE



01152004 No Chg-P CR2E034 (10/03)

4. FEI Number 54-1299238	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent INTRASTATE REGISTERED AGENT CORPORATION C/O HOLLAND & KNIGHT LLP 701 BRICKELL AVE., SUITE 3000 MIAMI, FL 33131
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.


SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000051747 02/16/04-80063-013 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD SILLS, RICHARD P 2099 PENNSYLVANIA AVE. NW SUITE 100 WASHINGTON, DC 20006
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CHADICK, SHELLEY L 2099 PENNSYLVANIA AVE. NW. AVE. 100 WASHINGTON, DC 20006
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	1-15-04 (202) 862-5964
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #