

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J93909

Entity Name: JANSEN BUILDERS, INC.

FILED
Jan 05, 2009
Secretary of State

Current Principal Place of Business:

3333 W. RIVIERA COURT
MEQUON, WI 53092 US

New Principal Place of Business:

Current Mailing Address:

3333 W. RIVIERA COURT
MEQUON, WI 53092 US

New Mailing Address:

FEI Number: 39-1593732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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: PD () Delete
Name: JANSEN, RALPH L
Address: 3333 W. RIVIERA COURT
City-St-Zip: MEQUON, WI 53092

Title: D () Delete
Name: ORENSTEIN, WILLIAM
Address: 735 NORTH WATER STREET, SUITE 1225
City-St-Zip: MILWAUKEE, WI 53202

Title: AS () Delete
Name: JANSEN, MARY C
Address: 3333 WEST RIVIERA COURT
City-St-Zip: MEQUON, WI 53092

Title: VPS () Delete
Name: DUFFY, THOMAS J
Address: 3333 W RIVIERA CT
City-St-Zip: THIENSVILLE, WI 53092

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VPSD (X) Change () Addition
Name: DUFFY, THOMAS J
Address: 3333 W RIVIERA CT
City-St-Zip: THIENSVILLE, WI 53092

Title: D () Change (X) Addition
Name: JANSEN, THOMAS
Address: 3333 W.RIVIERA COURT
City-St-Zip: MEQUON, WI 53092

I hereby certify that the information supplied with this filing does not qualify 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: MARY JANSEN

AS

01/05/2009

Electronic Signature of Signing Officer or Director

Date