


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 15, 2007 8:00 am
Secretary of State

01-25-2007 90053 017 ***150.00

DOCUMENT # P03000065994 1. Entity Name THE MORTENSEN TEAM, PA	
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Principal Place of Business 18568 SW 42 STREET MIRAMAR, FL 33029	Mailing Address 18568 SW 42 STREET MIRAMAR, FL 33029
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DO NOT WRITE IN THIS SPACE



01202007 No Chg-P CR2E034 (11/05)

4. FEI Number 57-1173682	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**MORTENSEN, LINDA
18568 SW 42 STREET
MIRAMAR, FL 33029**

**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 _____
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when renewing) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRES MORTENSEN, LINDA 18568 SW 42 ST MIRAMAR, FL 33029
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 information empowered.

SIGNATURE: Linda Mortensen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
LINDA MORTENSEN

2-12-07 **954-442-8602**
Date Daytime Phone #