

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153226

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** PETER JACOBSEN ENTERPRISES,INC.

**Current Principal Place of Business:**

3461 BONITA BAY BLVD  
SUITE 204  
BONITA SPRINGS, FL 34134 US

**New Principal Place of Business:**

27771 MARINA POINTE DRIVE  
BONITA SPRINGS, FL 34134 US

**Current Mailing Address:**

3461 BONITA BAY BLVD  
SUITE 204  
BONITA SPRINGS, FL 34134 US

**New Mailing Address:**

9400 SW BARNES ROAD  
SUITE 550  
PORTLAND, OR 97225 US

**FEI Number:** 20-0588788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: JACOBSEN, PETER E  
Address: 27771 MARINA POINTE DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: SD  
Name: JACOBSEN, JAN D  
Address: 27771 MARINA POINTE DRIVE  
City-St-Zip: BONITA SPRINGS, FL 34134 US

I hereby 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 all other like empowered.

SIGNATURE: PETER JACOBSEN

PD

02/08/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date