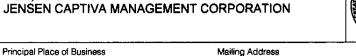
2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000066910 JENSEN CAPTIVA MANAGEMENT CORPORATION



FILED Jan 31, 2008 08:00 AN Secretary of State



15107 CAPTIVA DRIVE CAPTIVA, FL 33924

SIGNATURE:

P.O. BOX 191 CAPTIVA, FL 33924

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DO NOT WRITE IN THIS SPACE			^E	01222008	No Chg-P	CR2E03	4 (11/05)
				4. FEI Numb 20-860			Applied For Not Applicable
			5. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name and Address of Current Regis	tered Agent					<u>.</u>
JENSEN, DAVID 15107 CAPTIVA DRIVE CAPTIVA, FL 33924			DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or r	egistered agent, or bo	th, in the State of Flo	orida. I am fa	miliar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Registered	5 Agent signature	required when remetating)		DATE	
	E NOW!!! FEE IS \$150.00 ny 1, 2008 Fee will be \$850.00	Election Campaign Finan Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS	!		· · · · · · · · · · · · · · · · · · ·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST JENSEN, DAVID 15707 CAPTIVA DR. P.O. BOX 191 CAPTIVA, FL 33924				U0000(0806760	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					02/06/08	-30055-	018 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ⁻	THIS SF	ACE	
TITLE Name Street address City+St-Zip							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
of the cor	certify that the information supplied with this fit on this report or supplemental report is true a poration or the receiver or trustee empowered or on an attachment with an address with all	ind accurate and that my signati I to execute this report as requir	ure shall hav	e the same legal effec	t as if made under d	oath: that I am	an officer or director