

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P92000006742

Entity Name: CHRISTIANSEN, INC.

FILED  
Jan 12, 2005  
Secretary of State

## Current Principal Place of Business:

2018 HIDDEN PINE LANE  
APOPKA, FL 32712 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 943  
APOPKA, FL 32704943 US

## New Mailing Address:

FEI Number: 59-3154780

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHRISTIANSEN, ROBERT A  
2018 HIDDEN PINE LANE  
APOPKA, FL 32712 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: PSTD ( ) Delete  
Name: CHRISTIANSEN, ROBERT A  
Address: 2018 HIDDEN PINE LANE  
City-St-Zip: APOPKA, FL 32712

Title: D ( ) Delete  
Name: CHRISTIANSEN, ANN-MARIE  
Address: 2018 HIDDEN PINE LANE  
City-St-Zip: APOPKA, FL 32712

Title: D ( ) Delete  
Name: CHRISTIANSEN, JR. R A.  
Address: 2018 HIDDEN PINE LN  
City-St-Zip: APOPKA, FL

## 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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT A. CHRISTIANSEN

PRES

01/12/2005

Electronic Signature of Signing Officer or Director

Date