


2007 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
Feb 22, 2007 08:00 AM
Secretary of State

DOCUMENT # P93000073165
 1. Entity Name
 OIVIND E. JENSEN, P.A.



Principal Place of Business OAK TREE MEDICAL CTR STE 20 NAPLES, FL 34110 US	Mailing Address 90 CYPRESS WAY EAST NAPLES, FL 34110 US
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DO NOT WRITE IN THIS SPACE



02052007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0443586	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JENSEN, OIVIND E
 OAK TREE MEDICAL CTR
 90 CYPRESS WAY EAST #20
 NAPLES, FL 34110

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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

000000644212
 03/02/07-80034-010 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JENSEN, OIVIND E 90 CYPRESS WAY E #20 OAKTREE MEDICAL CTR NAPLES, FL
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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 like empowered.

SIGNATURE: Oivind E. Jensen 2/20/07 239-597-3399
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #