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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000100360 (2)

K. C. JENSEN CONSTRUCTION, INC.

Principal Place of Business Mailing Address 30921 SATIN LEAF LANE 30921 SATIN LEAF LANE WESLEY CHAPEL FL 33543 WESLEY CHAPEL FL 33543

FILED Apr 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/09/1996 2. Principal Place of Business 2a. Mailing Address Applied For PÕ BOL1030 21 65-0725336 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be SAN ANTONIO I fl 23 Trust Fund Contribution Added to Fees 33576 Country 8. This corporation owes or has paid the current year Intangible OSA 24 25 29 Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name JENSEN, KENNETH C 30921 SATIN LEAF LANE Street Address (P.O. Box Number is Not Acceptable) **WESLEY CHAPEL FL 33543** 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 11 TITLE Change Addition JENSEN, KENNETH C NAME 1.2 NAME 30921 SATIN LEAF LN STREET ADORESS 1.3 STREET ADDRESS WESLEY CHAPEL FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE TS 2.1 TITLE Change Addition JENSEN, SANDRA L NAME 2.2 NAME P.O.BOX 1030 STREET ADDRESS 2.3 STREET ADDRESS SAN ANTONIO FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address

4.12-00