

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 12, 1999 8:00 am
Secretary of State

04-12-1999 90005 005 ***150.00

DOCUMENT # S13329

1. Corporation Name

JENSEN/JENSEN CORPORATION

Principal Place of Business

% J. PHIL JENSEN
4906 14TH AVE., E.
BRADENTON FL 34208
US

Mailing Address

% J. PHIL JENSEN
4906 14TH AVE., E.
BRADENTON FL 34208
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/05/1990

4. FEI Number

59-3037228

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 % J. Phil Jensen

2a. Mailing Address

26 % J. Phil Jensen

Suite, Apt. #, etc.

22 8319 Whispering Woods Ct.

27 8319 Whispering Woods Ct.

23 Bradenton, Florida

28 Bradenton, Florida

24 34202-2272 25 US

29 34202-2272 30 US

9. Name and Address of Current Registered Agent

JENSEN, ROSALEE LYNNE
4906 14TH AVE., E.
BRADENTON FL 34208

(New Address
only)

10. Name and Address of New Registered Agent

81 Name Jensen, Rosalee Lynne

82 Street Address (P.O. Box Number is Not Acceptable)

83 8319 Whispering Woods Court

84 City Bradenton

FL

85 Zip Code 34202-2272

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 Rosalee Lynne Jensen

Rosalee Lynne Jensen

4/6/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME JENSEN, J. PHIL
STREET ADDRESS 4906 14TH AVE., E.
CITY-ST-ZIP BRADENTON FL

☐ DELETE

TITLE ST
NAME JENSEN, R., LYNNE
STREET ADDRESS 4906 14TH AVE., E.
CITY-ST-ZIP BRADENTON FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☒ Change ☐ Addition

8319 Whispering Woods Court

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☒ Change ☐ Addition

8319 Whispering Woods Court

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I hereby 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, with all other like empowered.

SIGNATURE:

J. Phil Jensen

4/6/99 941/907-6016

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

CR2E034 (1/198)