

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

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 322710 (5)
 1. Corporation Name
JOHNSON ENGINEERING, INC.

Principal Place of Business 2158 JOHNSON STREET PO BOX 1590 FORT MYERS FL 33902	Mailing Address 2158 JOHNSON STREET PO BOX 1590 FORT MYERS FL 33902
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/03/1967	
21		26		4. FEI Number 59-1173834	Applied For Not Applicable
22. Suite, Apt. #, etc.		27. Suite, Apt. #, etc.		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Zip	25. Country	29. Zip	30. Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

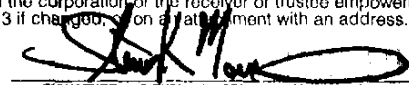
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
MORRISON, STEVEN K 2158 JOHNSON ST FT MYERS FL 33901				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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 _____ DATE **January 30, 1998**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE	C/D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	BARRACO, CARL A.			1.2 NAME	Forrest H. Banks		
STREET ADDRESS	8380 AQUA COVE COURT			1.3 STREET ADDRESS	1334 Jambalana Lane		
CITY-ST-ZIP	NORTH FOR MYERS FL			1.4 CITY-ST-ZIP	Fort Myers, FL 33901		
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	P	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	KEILING, KENTON R.			2.2 NAME	Steven K. Morrison		
STREET ADDRESS	736 ANTALYA COURT			2.3 STREET ADDRESS	1231 Walden Drive		
CITY-ST-ZIP	PUNTA GORDA FL			2.4 CITY-ST-ZIP	Fort Myers, FL 33901		
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE	VD	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	KEY, W. DAVID			3.2 NAME	W. Britt Pomeroy, Jr.		
STREET ADDRESS	439 PRATHER DRIVE			3.3 STREET ADDRESS	15900 Candlewood Drive		
CITY-ST-ZIP	FORT MYERS FL			3.4 CITY-ST-ZIP	Fort Myers, FL 33908		
TITLE	VD	<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	EBNER, JOSEPH W.			4.2 NAME			
STREET ADDRESS	2025 S.E. 44TH STREET			4.3 STREET ADDRESS			
CITY-ST-ZIP	CAPE CORAL FL			4.4 CITY-ST-ZIP			
TITLE	STD	<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	TILTON, ANDREW D.			5.2 NAME			
STREET ADDRESS	18810 SERENOA CT.			5.3 STREET ADDRESS			
CITY-ST-ZIP	ALVA FL			5.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	GRANT, ARCHIE T JR			6.2 NAME			
STREET ADDRESS	1302 MELALEUCA LANE			6.3 STREET ADDRESS			
CITY-ST-ZIP	FT MYERS FL			6.4 CITY-ST-ZIP			

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, on a statement with an address.

SIGNATURE:  **Steven K. Morrison** 1/30/98 (941) 334-0046

CR2E034 (10/97)