## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L39010

FILED Jan 15, 2009 Secretary of State

Entity Name: JOHNSON FINANCIAL SERVICES, INC.

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Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	LVD EAST			
STE F BRADENT	ON, FL 34208	34430		
Current M	lailing Addres	ss:	New Mailing Addres	s:
STE F	LVD EAST			
BRADENT	ON, FL 34208	34430		
El Number	: 65-0162947	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
	N, STEVEN E.			
239 301 BI STE F BRADENT The above n the State	LVD EAST ON, FL 34208 named entity set of Florida.		ourpose of changing its registere	ed office or registered agent, or both,
239 301 BI STE F BRADENT The above n the State	LVD EAST ON, FL 34208 named entity se of Florida. RE:	submits this statement for the p		ed office or registered agent, or both,
239 301 BI STE F BRADENT The above n the State	LVD EAST ON, FL 34208 named entity se of Florida. RE: Electror			
239 301 BISTE F BRADENT The above n the State BIGNATUI	LVD EAST ON, FL 34208 named entity se of Florida. RE: Electror	submits this statement for the pair is statement for the pair is statement for the pair is submitted. Signature of Registered Agray Trust Fund Contribution ( ).	ent	
239 301 BISTE F BRADENT The above n the State BIGNATUI	LVD EAST ON, FL 34208 named entity set of Florida. RE: Electror mpaign Financing S AND DIREC	submits this statement for the paic Signature of Registered Agg Trust Fund Contribution ( ).  TORS: Delete EVEN E EAST, SUITE F	ent	Date

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: STEVEN E JOHNSON P 01/15/2009