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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

L52745

(1)

| GENE   | E JOHNSON, INC.   |   |   |   |  |  |              |                          |   |
|--|---|---|---|---|--|--|--------------|--------------------------|---|
| Principal Place  | of Business   | Mailing Address   | 3   |   |  |  | 9            |                          |   |
|  | E.JOHNSON<br>JBUS PARKWAY   |   | EJOHNSON<br>IBUS PARKWAY  |   |  |  |              |                          |   |
|  | DD FL 33021-6224  |   | LYWOOD FL 33021-6224  |   | Date Incorporated or Qualified   |  |              | Panari                   |   |
|  |   |   |   |   |  | 02/26/1990   | 3a.          | 04/11/                   |   |
| 2. Principal Pla   | ace of Business   | 2a. Mailing Add   | ress  |   |  | 4. FEI Number  |              |                          | Applied For   |
| <u> </u>   |   | 26  |   |   |  | 59-1651641   |              |                          | Not Applicable  |
| Suite, Apt. 1  | #, etc.   | Suite, Apt. 1   | , etc.  |   |  | 5. Certificate of Status Desire  | ed 🔲         |                          | 5 Additional<br>Required                              |
| City & State   | )   | City & State  |   | · · · ·   |  | 6. Election Campaign Finance   | ing          |                          | 00 May Be   |
| 3  |   | 28  |   |   |  | Trust Fund Contribution  |              | •                        | ed to Fees  |
| Zip  | Country   | Zip   | $\vdash$  | Country   |  | 8. This corporation has liabilit   |              |                          | s 199.032,  |
| <u> </u>   | 25  | 29  | 30  | - 1   |  | Florida Statutes L  10. Name and Address of N  | Yes N        |                          |   |
|  | 9. Name and Address of Current  | Hegistered Agent  |   | 81  | Name   | 10. Name and Address of N  | iew negisie  | rea Agent                |   |
| IOUNI  | SON, FARRIS E.  |   |   |   |  |  |              |                          |   |
|  | ULUMBUS PARKWAY   |   | <b>62</b> St  |   | Street Addi  | ress (P.O. Box Number is Not Acc   | eptable)     |                          |   |
|  | (WOOD FL 33081  |   |   | 83  |  |  |              |                          |   |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |   |   |   | 84  | City   |  |              | <b></b> 85 2             | Zip Code  |
|  |   |   |   |   | •  |  |              | FLII                     |   |
| <b>11.</b> Pursuant t  | to the provisions of Sections 607.0502  | and 607.1508. Flori   | da Statutes, the  | above-pa  | amed corooi  | ration submits this statement for th   | ne purpose o | it changing its          | s registered office<br>ed agent. Lam                  |
| or register<br>familiar wit  | ed agent, or both, in the State of Florid<br>th, and accept the obligations of, Section   | a. Such change was  | s authorized by t   | he corpo  | oration's boa  | rd of directors. I hereby accept the   | e appointmer | it as registere          |   |
| or register<br>familiar wit<br>SIGNATURE   | ed agent, or both, in the State of Florid<br>th, and accept the obligations of, Section<br>Signature, typod or printed name of registered agent a | a. Such change was<br>on 607.0505, Florida  | s authorized by t<br>s Statutes.  | he corpo  | oration's boa  | rd of directors. I hereby accept the street of directors.  | e appointmer |                          |   |
| or register<br>familiar wit<br>SiGNATURE   | th, and accept the obligations of, Section Signature, typed or priviled name of registered agent a OFFICERS AND                                   | a. Such change was<br>on 607.0505, Florida<br>and title if applicable.  DIRECTORS       | s authorized by the Statutes.  (NOTE: Regis   | he corpo  | oration's boa  | rd of directors. Thereby accept the  | e appointmer | TE<br>AND DIRECT         | ORS IN 12   |
| or register<br>familiar wit<br>SiGNATURE<br>112.   | th, and accept the obligations of, Section  Signature, typed or priviled name of registered agent a  OFFICERS AND  D                              | a. Such change was<br>on 607.0505, Florida<br>ind title if applicable.                  | s authorized by the Statutes.  (NOTE: Registres)  | tered Agent  13. 1.1 TITLE  | oration's boa  | rd of directors. Thereby accept the directors and the directors of the directors and | e appointmer | TE                       | ORS IN 12   |
| or register<br>familiar wit<br>SIGNATURE<br>12.<br>IITLE   | th, and accept the obligations of, Section Signature, typed or printed name of registered agent a OFFICERS AND D JOHNSON, FARRIS E.               | a. Such change was<br>on 607.0505, Florida<br>and title if applicable.  DIRECTORS       | s authorized by the Statutes.  (NOTE: Regis   | tered Agent  13. 1.1 TITLE 1.2 NAME   | oration's boa  | rd of directors. Thereby accept the directors and the directors of the directors and | e appointmer | TE<br>AND DIRECT         | ORS IN 12   |
| or register familiar with signature.  12.  ITTLE NAME STREET ADDRESS   | signature, typed or printed name of registered agent a OFFICERS AND D JOHNSON, FARRIS E. 519 COLUMBUS PARKWAY                                     | a. Such change was<br>on 607.0505, Florida<br>and title if applicable.  DIRECTORS       | s authorized by the Statutes.  (NOTE: Regis   | stered Agent  13. 1. 1 TITLE 1.2 NAME 1.3 STREET A  | Signature require  | rd of directors. Thereby accept the directors and the directors an | e appointmer | TE<br>AND DIRECT         | ORS IN 12   |
| or register<br>familiar vvii<br>SIGNATURE  | th, and accept the obligations of, Section Signature, typed or printed name of registered agent a OFFICERS AND D JOHNSON, FARRIS E.               | a. Such change was<br>on 607.0505, Florida<br>and title if applicable.  DIRECTORS       | s authorized by the Statutes.  (NOTE: Regis   | tered Agent  13. 1.1 TITLE 1.2 NAME   | Signature require  | rd of directors. Thereby accept the directors and the directors an | e appointmer | TE<br>AND DIRECT         | ORS IN 12   |
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| Or register familiar wild signature    12.  1111.E  12.  1111.E  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  | signature, typed or printed name of registered agent a OFFICERS AND D JOHNSON, FARRIS E. 519 COLUMBUS PARKWAY                                     | a. Such change was on 607.0505, Florida and title if applicable. DIRECTORS DE DE        | LETE  LETE  LETE  LETE  LETE  LETE  | Interest Agent  13. 1.1 TITLE 1.2 NAME 1.3 STREET / 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET / 3.1 TITLE 3.3 STREET / 3.1 TITLE 4.2 NAME 4.2 NAME 4.3 STREET / 4.4 CITY-ST 5.1 TITLE 5.2 NAME 5.3 STREET / 5.4 CITY-ST 6.1 TITLE 5.4 CITY-ST 6.7 TITLE 5.5 STREET / 6.7 TITLE 5.6 STREET / 6.7 TITLE 5.7 TITLE 5.8 NAME 5.9 STREET / 6.7 TITLE 5.9 NAME 5.9 STREET / 6.7 TITLE   | ADDRESS 1- ZIP                 | rd of directors. Thereby accept the adventage of the state of the stat | e appointmer | AND DIRECT Change Change | ORS IN 12      Addition  Addition  Addition  Addition |
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SIGNATURE:

OTORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-1596

954-963->>75 Daytime Phone #