2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004051

FILED Jun 06, 2008 Secretary of State

Entity Name: THE FLOYD C. JOHNSON AND FLO SINGER JOHNSON FOUNDATION, INC.

Current P	Principal Place of Business:	New Principal Place of Business:
1605 MAIN 1010		
SARASO1	TA, FL 34236	
Current N	failing Address:	New Mailing Address:
P.O. BOX SARASO1	5669 TA, FL 34277	
n accordan	r: 65-0971968	d not receive the prior notice.
Name and	d Address of Current Registered Agent:	: Name and Address of New Registered Agent:
1605 MAIN SARASOT The above		he purpose of changing its registered office or registered agent, or both,
n the Stat SIGNATU	e of Florida. □□	
SIGNATO	KL.	
	Electronic Signature of Registered	Agent Date
OFFICER	Electronic Signature of Registered S AND DIRECTORS:	Agent Date ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Γitle: √ame: √ddress:	-	
OFFICER Title: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip:	PD () Delete SINGER-JOHNSON, FLO BOX 5669	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR: Title: () Change () Addition Name: Address:
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	PD () Delete SINGER-JOHNSON, FLO BOX 5669 SARASOTA, FL 34277 D () Delete PACE, NOEBEL PALMA SOLA DR.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Title: Name: Name: Name: Name: Name:	PD () Delete SINGER-JOHNSON, FLO BOX 5669 SARASOTA, FL 34277 D () Delete PACE, NOEBEL PALMA SOLA DR. BRANDENTON, FL SD () Delete BARTH, DIANE 342 N WASHINGTON DR.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIANE BARTH S/D 06/06/2008