

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000024746



1. Entity Name
JOHNSON POOLS, INC.

Principal Place of Business
401 MASSACHUSETTS AVE
PENSACOLA, FL 32505

Mailing Address
401 MASSACHUSETTS AVE
PENSACOLA, FL 32505



01152008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3712697	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, DANIEL EDWARD
4797 MALLARD CREEK RD
PENSACOLA, FL 32526

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [Signature] DANIEL E. JOHNSON 1/25/08
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstalling) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, DANIEL EDWARD 4797 MALLARD CREEK RD PENSACOLA, FL 32526
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, DANIELLE JEAN 604 CARONDELAY DR PENSACOLA, FL 32506
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOACK, BRIAN MARK 1200 GREYSTONE LN PENSACOLA, FL 32514
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, TINA L 4797 MALLARD CREEK DR PENSACOLA, FL 32526
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NOACK, LONZELLE SIRI 1200 GREYSTONE LN PENSACOLA, FL 32514
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/18/08-00024-008, 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other persons empowered.

SIGNATURE: [Signature] DANIEL E. JOHNSON 1/25/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date