

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 820713

FILED  
May 19, 2010  
Secretary of State

Entity Name: JOHNSONITE INC.

**Current Principal Place of Business:**

16910 MUNN RD  
CHAGRIN FALLS, OH 44023

**New Principal Place of Business:**

**Current Mailing Address:**

16910 MUNN RD  
CHAGRIN FALLS, OH 44023

**New Mailing Address:**

FEI Number: 34-0317950

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: GIANNUZZI, MICHEL  
Address: 2 RUE DE L'EGALITE  
City-St-Zip: NANTERRE, FR 92748

Title: D  
Name: BENETREAU, JACQUES  
Address: 2 RUE DE L'EGALITE  
City-St-Zip: NANTERRE, FR 92748

Title: S  
Name: SOUHA, AZAR  
Address: 1001 YAMASKA STREET E  
City-St-Zip: FARNHAM, QC J2N 1J7 CA

Title: DP  
Name: BUTTITTA, LOUIS J  
Address: 16910 MUNN RD  
City-St-Zip: CHAGRIN FALLS, OH 44023

Title: T  
Name: COCHRAN, GEARY C  
Address: 16910 MUNN RD  
City-St-Zip: CHAGRIN FALLS, OH 44023

Title: VP  
Name: PASTORE, CARMEN  
Address: 16910 MUNN RD  
City-St-Zip: CHAGRIN FALLS, OH 44023

I hereby 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 all other like empowered.

SIGNATURE: GEARY C COCHRAN

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05/19/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date