## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 200100** 

Entity Name: JOHNSON & JOHNSON, INC.

FILED Mar 07, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1607 US HWY 90 EAST MADISON, FL 32340

Current Mailing Address: New Mailing Address:

U.S. 90 EAST P O BOX 157

P.O. BOX 157 MADISON, FL 32341 MADISON, FL 32341

FEI Number: 59-0799238 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JOHNSON, J K

100 E. FRALEIGH DRIVE
MADISON, FL 32340 US

JOHNSON, JACOB K JR
1778 NE COLIN KELLY HWY
MADISON, FL 32340 US

MADISON, FL 32340 US

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: JACOB K JOHNSON JR 03/07/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PT
 ( ) Delete
 Title:
 P
 (X) Change ( ) Addition

 Name:
 JOHNSON, JACOB K SR
 Name:
 JOHNSON, JACOB K JR

 Address:
 100 E. FRALEIGH DRIVE
 Address:
 1778 NE COLIN KELLY HWY

City-St-Zip: MADISON, FL 32340 City-St-Zip: MADISON, FL 32340

Title: S () Delete Title: ST (X) Change () Addition Name: JOHNSON, JACQUELINE P Name: WARING, ELIZABETH A Address: 2830 NE COLIN KELLY HWY

Address: 100 E. FRALEIGH DRIVE Address: 2830 NE COLIN KELLY HWY
City-St-Zip: MADISON, FL 32340 City-St-Zip: MADISON, FL 32340

Title: V () Delete Title: D (X) Change () Addition
Name: JOHNSON, JACOB K JR
Address: DT 4 POX 080

Address: RT. 4, BOX 980 Address: 437 NE FRALEIGH DRIVE
City-St-Zip: MADISON, FL 32340 City-St-Zip: MADISON, FL 32340

Title: T ( ) Delete Title: D (X) Change ( ) Addition

 Name:
 WARING, ELIZABETH
 Name:
 JOHNSON, JACQUELINE P

 Address:
 2830 NE COLIN KELLY HWY
 Address:
 437 NE FRALEIGH DRIVE

 City-St-Zip:
 MADISON, FL 32340
 City-St-Zip:
 MADISON, FL 32340

I hereby certify that the information supplied with this filing does not qualify for the 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: JACOB K JOHNSON JR P 03/07/2006