2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOTOLDY N. JOHNSON, Secty Treas

FILED Jan 15, 2004 08:00 A Secretary of State

5. Certificate of Status Desired \$8.75 Additional Fee Required \$8.75 Additional Fee Requir	DOCUMENT # 344802 1. Entity Name W.G. JOHNSON & SON, INC.	Secretary of Stat	
DO NOT WRITE IN THIS SPACE 4. FEI Number 59-1258782 Not Applied F. 5. Cartificate of Status Desired \$3.75 Additional Fee Required 5. Cartificate of Status Desired \$3.75 Additional Fee Required 5. Cartificate of Status Desired \$3.75 Additional Fee Required DO NOT WRITE IN THIS SPACE 1. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. (am tamillar with, and act the obligations of registered agent, or both, in the State of Florida. (am tamillar with, and act the obligations of registered agent.) SIGNATURE Signature, typed or pinted name of Registered Agent 4ort like if explicable. (NOTE Registered Agent signature required when reinstating) PATE FILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee with be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. U00000004820 11. U00000004820 11. U00000004820 11. UP 11. OHNSON, W. G. JR. 12. UP 13. OHNSON, W. G. JENNIII	2430 N.W. 73RD PL 2430 N.W. 73RD PL	A CONTROL DE SERVICIO DE LA CONTROL DE LA CO	
JOHNSON, W.G. JR. 2430 NW 73RD PL GAINESVILLE, FL 32653 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 tamillar with, and accomplications of registered agent. SIGNATURE Signature. Types or printed name of Regulated agent and title if applicable. PATE FILE NOWILL FE IS \$150.00 After May 1, 2004 Fao with be \$550.00 P. Election Campaign Financing Trust Fund Contribution. DATE 9. Election Campaign Financing Trust Fund Contribution. DATE 10. OFFICERS AND DIRECTORS 110. OFFICERS AND DIRECTORS 1111E P. MANE JOHNSON, W.G. JR. STREET ADDRESS 2430 NW 73RD PLACE GAINESVILLE, FL UDD000004820 01/15/04-80027-017 150.00		O1122004 No Chg-P CR2E034 (10/03) 4. F51 Number Applied For 59-1258782 Not Applicable 5. Certificate of Status Desired \$8.75 Additional	
the obligations of registered agent. SIGNATURE Signature, types or printed name of Registered agent and title if applicable. (NOTE Registered Agent signature required when reinstailing) PILE NOWILL FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ITLE PNAME JOHNSON, W.G. JR. STRET ADDRESS 2430 NW 73RD PLACE CTY-ST-IP GAINESVILLE, FL U0000004820 U1/15/04-80027-017 150.00 NAME JOHNSON, W. GLENN III	JOHNSON, W G JR 2430 NW 73RD PL GAINESVILLE, FL 32653	IN THIS SPACE	
### After May 1, 2004 Fae will be \$550.00 Trust Fund Contribution. Added to Fees 10.	the obligations of registered agent. SIGNATURE		
TITLE	11E 1/01/11 FEE 10 4 100:00		
CITY-ST-ZIP GAINESVILLE, FL TITLE ST NAME JOHNSON, DOROTHY N STREET ADDRESS 2434 NIAL 73PD BLACE	TITLE P NAME JOHNSON, W.G. JR. STREET ADDRESS 2430 NW 73RD PLACE CITY-ST-IP GAINESVILLE, FL TITLE VP NAME JOHNSON, W. GLENN III STREET ADDRESS 2430 NW 73RD PLACE CITY-ST-IP GAINESVILLE, FL TITLE ST NAME JOHNSON, DOROTHY N		
CITY-ST-ZIP GAINESVILLE, FL DO NOT WRITE INTE INTHIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE MAME MAME MAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	TITLE MAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS ORTY-ST-ZPP TITLE NAME STREET ADDRESS CITY-ST-ZPP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or suppligmental report is true and accurrate and that my signature shall have the same legal effect as it made under oath; that I am an officer or direct 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 1 changed, or on an attachment with an address, with all other like empowered.	CITY-ST-ZIP TIYLE NAME STREET ADDRESS CITY-ST-ZIP	Tpition stated in Section 119,07(3)(i), Florida Statutes, I further certify that the Information are shall have the same legal effect as if made under oath; that I am an officer or director by Charles 607. Ended Statutes and the Charles 607. Ended Statutes and the Charles 607.	

1-12-2004