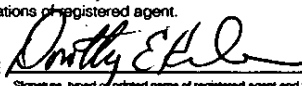
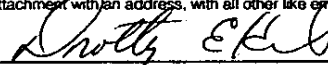


FILED
Feb 21, 2008 8:00 am
Secretary of State

02-21-2008 90014 040 ****61.25

2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 753234			
1. Entity Name JOHNSON ARMS CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 420 & 424 JOHNSON AVE. CAPE CANAVERAL, FL 32920		Mailing Address C/O J.H. SAPP 833 NICOLET AVE., STE. A WINTER PARK, FL 32789	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address c/o D. KERCHER	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 420 JOHNSON AVE # 2	
City & State		City & State CAPE CANAVERAL FL	
Zip	Country	Zip	Country
32920			
4. FEI Number 59-2027894		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SAPP, JAMES H 833 NICOLET AVE STE A2 WINTER PARK, FL 32789		7. Name and Address of New Registered Agent Name DOROTHY E KERCHER Street Address (P.O. Box Number is Not Acceptable) 420 JOHNSON AVE UNIT 2 City CAPE CANAVERAL FL Zip Code 32920	
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  DOROTHY E KERCHER, SEC/TREAS/DIR 2/18/08 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD AGRAMONTE, JEAN 230 E. LAUREN CT. MERRITT ISLAND, FL 32952 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SAPP, JAMES H 382 LAKEVIEW STREET ORLANDO, FL 32804 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D KERCHER, DOROTHY E 420 JOHNSON AVE # 2 CAPE CANAVERAL, FL 32920 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD EIFLER, GWENDOLYN H 2135 N COURTENAY PKWY., B-11 MERRITT ISLAND, FL 32953 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABBOTT, CAROL 1500 EAST BOULEVARD MAITLAND, FL 32751 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 617, 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 like empowered.			
SIGNATURE:  DOROTHY E. KERCHER 2/18/08 321-783-6596		Date Daytime Phone #	