

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 848900 (7)

1. Corporation Name

JOHNSON, JOHNSON & ROY, INC.

Principal Place of Business

110 MILLER  
ANN ARBOR MI 48104

Mailing Address

110 MILLER  
ANN ARBOR MI 48104



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

OTTE, ALAN H.  
% RUDNICK & WOLFE  
101 EAST KENNEDY BLVD., SUITE 2000  
TAMPA FL 33602

3. Date Incorporated or Qualified

04/21/1981

3a. Date of Last Report

02/06/1995

4. FEI Number

38-1691755

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

IND. E- Registered Agent's signature required when re-registering

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

D  
MIKON, ARNOLD  
150 WEST JEFFERSON  
DETROIT MI

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

VD  
MITCHELL, DEBRA  
2828 ROUTH  
DALLAS TX

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

PD  
MCGIBBON, WILLIAM H  
110 MILLER  
ANN ARBOR MI

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

VD  
KLANCNIK, FRED A.  
110 MILLER  
ANN ARBOR MI

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

VD  
CHRISTMAN, JAMES E  
110 MILLER  
ANN ARBOR MI

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

VTD  
LARSEN, TIMOTHY W.  
110 MILLER  
ANN ARBOR MI

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 registered agent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ASST. TREASURER

5/1/96

(313) 987-3933

Date

Daytime Phone #

CR2E034 (12/95)