

# 2011 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A00000001798

**FILED**  
**Mar 18, 2011**  
**Secretary of State**

**Entity Name:** W&G JOHNSON FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

269 MASHTA DR.  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

269 MASHTA DR.  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

FEI Number: 65-1065936

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CFRA, LLC  
4221 W. BOY SCOUT BLVD.  
10TH FLOOR  
TAMPA, FL 33607 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

**GENERAL PARTNER INFORMATION:**

Document #:

Name: GLORIA D.C. JOHNSON REVOCABLE LIVING TRUST

Address: C/O GLORIA JOHNSON, 269 MASHTA DR.

City-St-Zip: KEY BISCAYNE, FL 33149

**ADDRESS CHANGES ONLY:**

Address:

City-St-Zip:

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: GLORIA JOHNSON

GP

03/18/2011

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date