

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003034

Entity Name: JOHNSTONE DOWNEY KLEIN, INC.

FILED  
May 03, 2007  
Secretary of State

## Current Principal Place of Business:

692 NORTH HIGH STREET #207  
COLUMBUS, OH 43215

## New Principal Place of Business:

## Current Mailing Address:

692 NORTH HIGH STREET #207  
COLUMBUS, OH 43215

## New Mailing Address:

FEI Number: 31-1218240

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BROWN, MATTHEW R  
1862 CLASSIC DR.  
CORAL SPRINGS, FL 33071 US

## Name and Address of New Registered Agent:

MORAES, ALBERTO  
3901 STATE ROAD 84  
#103  
DAVIE, FL 33312 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: ALBERTO MORAES

05/03/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CP ( ) Delete  
Name: PLANT, MARIA M  
Address: 692 NORTH HIGH STREET #207  
City-St-Zip: COLUMBUS, OH 43215

Title: VCS ( ) Delete  
Name: HANDWORK, MATTHEW T  
Address: 692 NORTH HIGH STREET #207  
City-St-Zip: COLUMBUS, OH 43215

Title: DT ( ) Delete  
Name: CARL, WILLIAM E  
Address: 692 N. HIGH ST. #207  
City-St-Zip: COLUMBUS, OH 43215

Title: VP ( ) Delete  
Name: REGENHARDT, MARK A  
Address: 692 NORTH HIGH STREET #207  
City-St-Zip: COLUMBUS, OH 43215

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM E CARL

DT

05/03/2007

Electronic Signature of Signing Officer or Director

Date