SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $370)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
95 JUL 31 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F15977** **(4)**

1. Corporation Name
E.A. JOHNSON ENTERPRISES, INC.

Principal Place of Business	Mailing Address
847 W LINDENWOOD CIRCLE ORMOND BEACH FL 32174-4666	847 W LINDENWOOD CIRCLE ORMOND BEACH FL 32174-4666

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/23/1981
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 740 N.E 5TH AVE	26 740 N.E. 5TH AVE
Suite, Apt. #, etc. 22 UNIT # 6	Suite, Apt. #, etc. 27 UNIT 6
City & State 23 CRYSTAL RIVER FL	City & State 28 CRYSTAL RIVER FL.
Zip / Country 24 34428 / 25 CITRUS	Zip / Country 29 34428 / 30 CITRUS

4. FEI Number: 59-2167772 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
JOHNSON, ERNEST A 847 W LINDENWOOD CIRCLE ORMOND BEACH FL 32074	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPT	11 TITLE	DPT ☒ Change ADDRESS ☐ Addition
NAME	JOHNSON, ERNEST A	12 NAME	JOHNSON, ERNEST A
STREET ADDRESS	847 W LINDENWOOD CIR	13 STREET ADDRESS	740 N.E. 5TH AVE UNIT 6
CITY-ST-ZIP	ORMOND BCH FL	14 CITY-ST-ZIP	CRYSTAL RIVER FL. 34428
TITLE	AS	21 TITLE	☐ Change ☐ Addition
NAME	HAWORTH, ALFRED H	22 NAME	
STREET ADDRESS	2323 BELLEAIR RD	23 STREET ADDRESS	SAME
CITY-ST-ZIP	CLEARWATER FL	24 CITY-ST-ZIP	
TITLE	DVS	31 TITLE	DVS ☒ Change ADDRESS ☐ Addition
NAME	JOHNSON, C EVELYN	32 NAME	JOHNSON, C. EVELYN
STREET ADDRESS	847 W LINDENWOOD CIR	33 STREET ADDRESS	740 N.E. 5TH AVE UNIT 6
CITY-ST-ZIP	ORMOND BCH FL	34 CITY-ST-ZIP	CRYSTAL RIVER, FL 34428
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E034 (3/95)

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)(i), 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 receiver 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 added by attachment with an address.

PHONE NOT IN YET

SIGNATURE: Ernest A Johnson ERNEST A. JOHNSON 7/17/95 904 795-1477
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

NEIGHBOR

0124770 FP