2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000002426

JOHANSON, RICHARD

5583 E. OLIVE AVE

FRESNO, CA 93727

Name:

Address:

City-St-Zip:

Entity Name: JOHANSON TRANSPORTATION SERVICE, INC.

FILED Jan 20, 2009 Secretary of State

| Current Principal Place of Business: | | | | New Principal Place of Business: | | | |
|---|-----------------------------|------------|-----------------------------|--|-----------------|---------------------------|--------------|
| 1542 KING | SSLEY AVE | | | | | | |
| STE 133 | | | | | | | |
| ORANGE | PARK, FL 32 | 2073 | US | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | |
| PO BOX 5: FRESNO, | | US | | | | | |
| FEI Number: | 94-2165765 | FEI | Number Applied For() | FEI Number Not Appl | icable () | Certificate of Status Des | sired () |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | | |
| 133 | SLEY AVE S | | | | | | |
| ORANGE | PARK, FL 32 | 2073 U | S | | | | |
| | named entity of Florida. | y submi | ts this statement for the p | ourpose of changing i | ts registered o | office or registered age | nt, or both, |
| SIGNATUR | RE: | | | | | | |
| | Electro | onic Sig | nature of Registered Age | ent | | Date | |
| Election Car | npaign Financi | ing Trust | Fund Contribution (). | | | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: | PRES (| () Delete | ; | Title: | (|) Change () Addition | |
| Name: | JOHANSON, | | | Name: | | , 3 () | |
| Address: | 5583 E. OLIV | /E AVE | | Address: | | | |
| City-St-Zip: | FRESNO, CA | 93727 | | City-St-Zip: | | | |
| Title: | V | () Delete | 1 | Title: | V (X |) Change ()Addition | |
| Name: | JOHANSON, | . , | | Name: | JOHANSON, H | | |
| Address: | 7150 SW HAI | | | Address: | , | ZIKER RD STE 200 | |
| City-St-Zip: | PORTLAND, | | | City-St-Zip: | TIGARD, OR 9 | | |
| Title: | S (| () Delete | | Title: | | Change () Addition | |
| | | . , | ; | Name: | (, |) Change () Addition | |
| Name: Address: | SPICER, JAN 5583 E. OLIV | | | Name. Address: | | | |
| City-St-Zip: | FRESNO, CA | | | | | | |
| City-St-Zip. | i KESNO, CA | 33121 | | City-St-Zip: | | | |
| Title: | Т (| () Delete | : | Title: | (|) Change () Addition | |

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JANICE SPICER SEC 01/20/2009