## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## G72211 **DOCUMENT #**



## **FILED** Feb 24, 2003 8:00 am Secretary of State

JOHNSC		NHOUSES, INC.						02-24-	2003 30	948 018	***150	0.00
Principal Pla 710 OLD MT EUSTIS FL 3		s	Mailing Ad 710 OLD N EUSTIS FL	MT DORA RD			-{       	1101 <b>68</b> 11 1 <b>8817</b> 11 <b>8</b> 1	<b>1</b> 31 <b>32</b> 1 41 <b>33</b> 4 1	11 <b>2</b> 1 31 <b>1</b> 11 <b>211</b> 1	I dirəyi dirəy	Olohi Gibil Iool
2. Principal	Place of Busin	ness	3. Mailing A	Address			-					
Suite, Apt. #, etc.			Suite, Apt. #, etc.				-	☐ CHECK	. HERE IF I	MAKING (	HANGES	ì
City & Sta	ate		City & Sta	ate		<del></del>	4. FEI Num	<sup>aber</sup> 59-235	3075			pplied For
Zip		Country	Zip		Count	ry	5. Certifica	te of Status De		□ \$-	B.75 Ad ee Require	ot Applicable ditional
	6. Name	and Address of Curr	ent Registered Ag	ent	<u> </u>	<del></del>	7 Name a	nd Address of	New Pegi			
		· · · · · · · · · · · · · · · · · · ·	<u> </u>			Name	· · · · · · · · · · · · · · · · · · ·	··· Auuless Ol	new negi	istered Ag	ent	<u></u>
JOHNSO	N, DENNIS						<del></del>		=	<del></del>	برجمتهم	
3501 BRI	TT ROAD					Street Address (	P.O. Box Num	ber is Not Acc	eptable)	<u>-</u>	· · · ·	
WIT. DURA	A FL 32757											
. ,						City				FL	Zip Cod	
8. The above	e named entity itions of registe	submits this statemer ered agent.	nt for the purpose o	of changing its	registered	d office or register	ed agent, or b	oth, in the Stat	e of Florida	a. I am fan	niliar with,	and accept
ine obliga												
SIGNATURE	Signature, typèd o	or printed name of registered ag	gent and title if applicable.	(NOTE	E: Registered	Agent signature required	when reinstating)	·		DATE		
SIGNATURE	Signature, typèd o		gent and title if applicable.	(NOTE	E: Registered	Agent signature required	when reinstating)	·		DATE		
SIGNATURE	Signature, typèd o	FEE IS \$150.00		(NOTE	≘: Registered	Agent signature required		Section Compo	niga Einens	h	ΦΕ.0	
SIGNATURE  F Afte Make Check	Signature, typèd o FILE NOW!!! or May 1, 2003		00	(NОТЕ	:: Registered	Agent signature required	<b>9.</b> E	lection Campa		h	<b>\$5.0</b> Added	May Be
SIGNATURE F Afte	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen	00	топ)	E: Registered	Agent signature required	<b>9.</b> E	rust Fund Conf	tribution.	cing	Added	d to Fees
SIGNATURE  F Afte Make Check	Signature, typed of FILE NOW!!! er May 1, 2003 k Payable to	FEE IS \$150.00 3 Fee will be \$550.1 Florida Departmen OFFICERS AI	t of State	⟨NOTE		Agent signature required	<b>9.</b> E		tribution.	cing []	Added	I to Fees
SIGNATURE  F Afte Make Check 10.	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON,	FEE IS \$150.00 3 Fee will be \$550.6 Florida Departmen OFFICERS AI	t of State		11.	Agent signature required	<b>9.</b> E	rust Fund Conf	tribution.	cing []	Added	d to Fees
SIGNATURE  F Afte Make Check 10.	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.6 Florida Departmen OFFICERS AI DENNIS R. RD.	t of State		11. TITLE NAME	Agent signature required	<b>9.</b> E	rust Fund Conf	tribution.	cing []	Added	I to Fees
SIGNATURE  F Afte Make Check  10.  TITLE NAME	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON,	FEE IS \$150.00 3 Fee will be \$550.6 Florida Departmen OFFICERS AI DENNIS R. RD.	t of State		11. TITLE NAME	ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	cing []	Added	I to Fees
SIGNATURE  F Afte Make Check  10.  TITLE NAME STREET ADDRESS	Signature, typed of FILE NOW!!! at May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F	FEE IS \$150.00 3 Fee will be \$550.6 Florida Departmen OFFICERS AI DENNIS R. RD.	00 t of State ND DIRECTORS	□ Delete	11. TITLE NAME STREET CITY-S	ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	cing []	Addec	I to Fees S IN 11 Addition
SIGNATURE  F Afte Make Checi 10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! at May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI DENNIS R. RD. FL 32757	00 t of State ND DIRECTORS		11. TITLE NAME STREET CITY-S TITLE	ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	cing []	Added	I to Fees
SIGNATURE  FAfte Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed of FILE NOW!!! at May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON,	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. FL 32757  REBECCA	00 t of State ND DIRECTORS	□ Delete	11. TITLE NAME STREET CITY-S TITLE NAME	ADDRESS IT-ZIP	<b>9.</b> E	rust Fund Conf	tribution.	cing []	Addec	I to Fees S IN 11 Addition
SIGNATURE  FAfte Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	00 t of State ND DIRECTORS	□ Delete	11. TITLE NAME STREET TITLE NAME STREET	ADDRESS T-ZIP ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	cing []	Addec	I to Fees S IN 11 Addition
SIGNATURE  F Afte Make Check  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! at May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON,	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	00 t of State ND DIRECTORS	□ Delete □ Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S	ADDRESS T-ZIP ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change	d to Fees S IN 11 Addition Addition
SIGNATURE  F Afte Make Check  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	00 t of State ND DIRECTORS	□ Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S	ADDRESS T-ZIP ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec	I to Fees S IN 11 Addition
SIGNATURE  F Afte Make Check  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	00 t of State ND DIRECTORS	□ Delete □ Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S	ADDRESS ST-ZIP ADDRESS T-ZIP	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change	d to Fees S IN 11 Addition Addition
SIGNATURE  FAfte Make Check  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	00 t of State ND DIRECTORS	□ Delete □ Delete	11.  TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS ADDRESS T-ZIP ADDRESS ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change	d to Fees S IN 11 Addition Addition
SIGNATURE  FAfte Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	DO t of State  ND DIRECTORS	□ Delete □ Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S	ADDRESS ADDRESS T-ZIP ADDRESS ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change	d to Fees S IN 11 Addition Addition
SIGNATURE  FAfte Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE TITLE	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	DO t of State  ND DIRECTORS	□ Delete □ Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE	ADDRESS ADDRESS T-ZIP ADDRESS ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change	d to Fees S IN 11 Addition Addition
SIGNATURE  FAfte Make Chec  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME STREET ADDRESS	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	DO t of State  ND DIRECTORS	□ Delete □ Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change	d to Fees S IN 11 Addition Addition
SIGNATURE  FAfte Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	DO t of State  ND DIRECTORS	□ Delete □ Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change	d to Fees S IN 11 Addition Addition
SIGNATURE  FAfte Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	ND DIRECTORS	Delete Delete Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change	d to Fees S IN 11 Addition Addition Addition
SIGNATURE  FAfte Make Check  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	ND DIRECTORS	□ Delete □ Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S' TITLE	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change	d to Fees S IN 11 Addition Addition
SIGNATURE  FAfte Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	ND DIRECTORS	Delete Delete Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S' TITLE NAME	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change	d to Fees S IN 11 Addition Addition Addition
SIGNATURE  FAfte Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	ND DIRECTORS	Delete Delete Delete	11. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S' TITLE NAME STREET CITY-S' TITLE NAME STREET	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change	d to Fees S IN 11 Addition Addition Addition
SIGNATURE  FAfte Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	DO t of State  ND DIRECTORS	Delete Delete Delete	11.  TITLE NAME STREET CITY-S	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change	d to Fees S IN 11 Addition Addition Addition
SIGNATURE  FAfte Make Checi 10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	DO t of State  ND DIRECTORS	Delete Delete Delete	11.  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-SI  TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change	d to Fees S IN 11 Addition Addition Addition
SIGNATURE  FAfte Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	DO t of State  ND DIRECTORS	Delete Delete Delete	11.  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-SI  TITLE NAME	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change Change	d to Fees S IN 11 Addition Addition Addition Addition
SIGNATURE  FAfte Make Checi 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORA F SD JOHNSON, 3501 BRITT BD JOHNSON, 3501 BRITT	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	DO t of State  ND DIRECTORS	Delete Delete Delete	11.  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-SI  TITLE NAME STREET CITY-SI  TITLE NAME STREET CITY-SI	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change Change	d to Fees S IN 11 Addition Addition Addition Addition
SIGNATURE  FAfte Make Checi 10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of FILE NOW!!! or May 1, 2003 k Payable to DP JOHNSON, 3501 BRITT MT DORAF SD JOHNSON, 3501 BRITT MT DORAL	FEE IS \$150.00 3 Fee will be \$550.0 Florida Departmen OFFICERS AI  DENNIS R. RD. RD. REBECCA	DO t of State  ND DIRECTORS	Delete Delete Delete	11.  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-S  TITLE NAME STREET CITY-SI  TITLE NAME	ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP  ADDRESS T-ZIP	<b>9.</b> E	rust Fund Conf	tribution.	RS AND D	Addec RECTOR: Change Change Change Change	d to Fees S IN 11 Addition Addition Addition Addition

indicated on this report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED N