2007 FOR PROFIT CORPORATION ANNUAL REPORT

Mailing Address

DOCUMENT # J24181 1. Entity Name JOHNSON'S JOURNEY'S END, INC. Principal Place of Business 7710 NE JACKSONVILLE ROAD OCALA, FL 34479 US



FILED Jan 09, 2007 08:00 AN Secretary of State

7710 NE JACKSONVILLE ROAD OCALA, FL 34479 US OCALA, FL 34479 US 01062007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2691903 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent JOHNSON, JEAN DO NOT WRITE 7710 NORTHEAST JACKSONVILLE ROAD **OCALA, FL 34479** IN THIS SPACE 8. 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. Lam familiar with, and accept the obligations of registered agent. 01/10/07-80029-025 158.75 SIGNATURE. (NOTE Registered Agent signature required when reinstating) Signature, typod or printed name of registered agent and title if applicable. 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be П Trust Fund Contribution. Added to Fees 10, OFFICERS AND DIRECTORS TITLE PTD NAME JOHNSON, JEAN 7710 NE JACKSONVILLE RD STREET ADDRESS CITY-ST-ZIP OCALA, FL VSD TITLE HENSLEY, PHILLIP R. NAME STREET ADDRESS 1090 HAVER HILL DRIVE CITY-ST-ZIP HAMILTON, OH TITE F NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MARKE STREET ADDRESS CITY-ST-ZIP **3 1711** NAME STREET ADDRESS Cary-ST-7IP TITLE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGN	ΔΤΙ	1RF

NAME STREET ADDRESS

From Johnson - JEAN JOHNSON - PLOT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR