FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

May 12 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE Secretary of State CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # K01030 (1) JOHNSON BOULEVARD CORPORATION Principal Place of Business Mailing Address 16167 US HWY. 19 N. 18167 US HWY 19 N. STE. 660 STE. 680 CLEARWATER FL 34624 CLEARWATER FL 34624-6569 3. Date Incorporated or Qualified 3a. Date of Last Report 11/09/1987 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2857064 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 23 Added to Fees Trust Fund Contribution Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, X Yes No 24 25 29 30 Florida Statutos 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JOHNSON, RICHARD C. 18167 US 19 N, STE 660 Street Address (P.O. Box Number is Not Acceptable) 82 **CLEARWATER FL 34624** 83 84 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 THE ☐ Change Addition JOHNSON, RICHARD C. NAME 1.2 NAME 1850 COUNTY RD 193 STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL** 1.4 C(1Y-S1-ZIP CITY-ST-ZIP DELETE 21 TITLE Change Addition TITLE MOHNEY, MARILYN J. NAME 2.2 NAME 7901 SEMINOLE BLVD. STREET ADDRESS 2.3 STREET ADDRESS SEMINOLE FL CITY-ST-ZIP 2.4 CUY-ST-ZiP DELETE Change Addition TITLE 3.1 TITLE JOHNSON, KELLY R. NAME 32 NAME 1860 COUNTY RD.193 STREET ADDRESS 3.3 STREET ADDRESS CLEARWATER FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 417/16 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(TY - ST - Z(P Change DELETE Addition 5.1 TIRLE TITLE NAME 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY- S1-ZIP CITY-ST-ZIP DELE1E Change Addition 6.1 THLE TITLE

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4. I do hereby certify that the information 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 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 on an attachment with an address. MARCH 24, 1997 KELLEY JOHNSON, SECRETARY, (813)530-5522 SIGNATURE:

6.2 NAME

NAME STREET ADDRESS CITY-ST-ZIP