FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAR 23 AM 9:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K16214 (4)

1. Corporation Name

JOHNSON DEVELOPMENT COMPANY, INC.

Principal Place of Business	Mailing Address
622 STALLION CT WINTER SPRINGS FL 32708	622 STALLION CT WINTER SPRINGS FL 32708

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/23/1988
3a. Date of Last Report: 04/08/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 59-2901918 ☐ 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

JOHNSON, CHARLES F. II
622 STALLION CT
WINTER SPRINGS FL 32708

10. Name and Address of New Registered Agent

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
Signature, typed or printed name of registered agent and title if signed above — NOTE: Registered Agent's signature required when name(s) (A)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDS	11 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, CHARLOTTE B.	12 NAME	500001439255
STREET ADDRESS	622 STALLION CT	13 STREET ADDRESS	-03/24/95--01071--015
CITY-ST-ZIP	WINTER SPRINGS FL	14 CITY-ST-ZIP	****208.75 ****208.75
TITLE	STD	21 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, CHARLES F. II	22 NAME	
STREET ADDRESS	622 STALLION CT	23 STREET ADDRESS	
CITY-ST-ZIP	WINTER SPRINGS FL	24 CITY-ST-ZIP	
TITLE	[illegible]	31 TITLE	☐ Change ☒ Addition
NAME		32 NAME	D. Rebecca Ford
STREET ADDRESS		33 STREET ADDRESS	1136 Dunadin Dr.
CITY-ST-ZIP		34 CITY-ST-ZIP	Winter Springs, FL. 32708
TITLE		41 TITLE	☐ Change ☒ Addition
NAME		42 NAME	D. C.F. Johnson III
STREET ADDRESS		43 STREET ADDRESS	922 W 3rd St. #W.
CITY-ST-ZIP		44 CITY-ST-ZIP	Bradenton, FL. 34209
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	AP 3/23/95
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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 on an attachment with an address.

SIGNATURE: C.F. Johnson C.F. Johnson II — 3/10/95 — 407-366-6707
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0037748 CP