

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 19, 2007 8:00 am**  
**Secretary of State**

07-19-2007 90023 015 \*\*\*150.00

**DOCUMENT # K49466**

1. Entity Name  
**JOHNSON ACCOUNTING, INC.**



Principal Place of Business  
**1492 AVOCADO AVENUE  
P. O. BOX 360894 (ZIP 32936)  
MELBOURNE, FL 32935**

Mailing Address  
**1492 AVOCADO AVENUE  
P. O. BOX 360894 (ZIP 32936)  
MELBOURNE, FL 32935**

**40126036**



2. Principal Place of Business - No P.O. Box #  
**1492 AVOCADO AVENUE**

3. Mailing Address  
**P.O. BOX 360894**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07172007 Chg-P CR2E034 (12/06)

City & State  
**MELBOURNE FLORIDA**

City & State  
**MELBOURNE FLORIDA**

4. FEI Number  
**59-2919698**

Applied For  
Not Applicable

Zip  
**32935**

Country  
**BREVARD**

Zip  
**32936**

Country  
**BREVARD**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**JOHNSON, ROBERT V.  
1492 AVOCADO AVENUE  
MELBOURNE, FL 32935**

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
Due by September 14, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
JOHNSON, ROBERT V.  
P.O. BOX 360894  
MELBOURNE, FL 32936** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**STD  
JOHNSON, M. FAYE  
P.O. BOX 360894  
MELBOURNE, FL 32936** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
JOHNSON, ROBERT A.  
P.O. BOX 360894  
MELBOURNE, FL 32936** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing 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.

**SIGNATURE: ROBERT V. JOHNSON**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/17/2007**

Date

**321-255-3181**

Daytime Phone #

# ATTACHMENT

40126036

# K49466

**JOHNSON ACCOUNTING, INC**  
**Accounting & Tax Service**

1492 Avocado Avenue  
P.O. Box 360894  
Melbourne, Florida 32936  
321-254-8459  
Fax 321-254-2044

Florida Department of State

After receiving a card of "Notice of intent to dissolve", I called the Corporate Division and told the person that I had not received a card notifying me to file the 2007 Corporate Annual Report. The department said I most likely did not have a card sent to me due to the address on the report listing a principal place of business and mailing address with 2 addresses.

I was instructed to go on your web site and download a printed form that I could change the address. I was also instructed to check the box "the entity did not receive a prior notice" and print a form to make changes.

I am enclosing this form and a check for the 2007 Corporate Annual Report.

  
Robert V. Johnson