2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000012872

Entity Name: JOHNSON FAMILY LLC

City-St-Zip:

WINNETKA, IL 60093

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 315 7TH AVE. NORTH NAPLES, FL 34102 **Current Mailing Address: New Mailing Address:** 315 7TH AVE. NORTH NAPLES, FL 34102 FEI Number: 59-3681954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, ROBERT T JR. 315 7TH AVE. NORTH NAPLES, FL 34102 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. SIGNATURE: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete JOHNSON, ROBERT T JR. Name: Name: Address: 315 7TH AVE. NORTH Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: JOHNSON, BETSIE B Name: Address: 315 7TH AVE. NORTH Address: City-St-Zip: NAPLES, FL 34102 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition JOHNSON, BLAKE R Name: Name: Address: 1330 ASBURY AVE Address: City-St-Zip: WINNETKA, IL 60093 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: JOHNSON, LISA S Name: Address: 1330 ASBURY AVE Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

City-St-Zip:

SIGNATURE: ROBERT T JOHNSON JR MGR 04/24/2006