

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004905

Entity Name: PARKS JOHNSON AGENCY, L.L.C.

FILED  
Jan 12, 2007  
Secretary of State

**Current Principal Place of Business:**

4498 WEST U.S. HWY 90  
LAKE CITY, FL 32055

**New Principal Place of Business:**

**Current Mailing Address:**

4498 WEST U.S. HWY 90  
LAKE CITY, FL 32055

**New Mailing Address:**

FEI Number: 37-1425583

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PARKS TYSON JOHNSON  
1198 NW SCENIC LAKE DR  
LAKE CITY, FL 32055 US

**Name and Address of New Registered Agent:**

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:**

Title: MGR ( ) Delete  
Name: JOHNSON, KATHLEEN C  
Address: 1198 NW SCENIC LAKE DR  
City-St-Zip: LAKE CITY, FL 32055

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: JOHNSON, PARKS T  
Address: 1198 NW SCENIC LAKE DR  
City-St-Zip: LAKE CITY, FL 32055

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.

SIGNATURE: PARKS TYSON JOHNSON

MGR

01/12/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date