


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000028155		
1. Entity Name JOHNSON FAMILY FLEA & FARMERS MARKET, LLC		
Principal Place of Business 5800 RAMONA BLVD. JACKSONVILLE, FL 32205	Mailing Address 1890 KINGSLEY AVENUE ORANGE PARK, FL 32073	

FILED
06 MAY 10 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02092006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0154459	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent SMITH HULSEY & BUSEY 225 WATER STREET, SUITE 1800 JACKSONVILLE, FL 32202

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00
Due by May 1, 2006**

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05/26/06--01052--001 **200.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUNTLEY, LOUIS L 1890 KINGSLEY AVE. ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HUNTLEY, LOUIS W 1890 KINGSLEY AVE. ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM JOHNSON, JOE 1890 KINGSLEY AVE. ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

11. 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 is true and accurate and that my 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:

[Signature]

L. Ward Huntley

4/24/06

904-276-3598

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #