

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043570

Entity Name: JOHNSON ORIGINALS, LLC

FILED  
Jun 20, 2006  
Secretary of State

**Current Principal Place of Business:**

14400 PADDOCK DR.  
WELLINGTON, FL 33414 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. 211252  
WEST PALM BEACH, FL 33411 US

**New Mailing Address:**

14400 PADDOCK DR.  
WELLINGTON, FL 33414 US

FEI Number: 48-0886016      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

JOHNSON, MARTHA J  
14400 PADDOCK DR.  
WELLINGTON, FL 33414 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, PATRICK W SR.  
Address: 14400 PADDOCK DR.  
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGRM ( ) Delete  
Name: JOHNSON, GABRIEL T  
Address: 14400 PADDOCK DR.  
City-St-Zip: WELLINGTON, FL 33414 US

Title: MGRM ( ) Delete  
Name: JOHNSON, BRANDEN L  
Address: 14400 PADDOCK DR.  
City-St-Zip: WELLINGTON, FL 33414 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PATRICK W. JOHNSON SR.

MGR

06/20/2006

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