

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000001504

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: JOHNSTON,POST AND POST, L.L.C.

## Current Principal Place of Business:

146 N.W. CENTRAL PARK PLAZA STE. 102  
PORT ST. LUCIE, FL 34986

## New Principal Place of Business:

## Current Mailing Address:

146 N.W. CENTRAL PARK PLAZA STE. 102  
PORT ST. LUCIE, FL 34986

## New Mailing Address:

FEI Number: 65-0576841

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FARRELL, RICKEY L  
1595 SE PORT ST. LUCIE BOULEVARD  
PORT ST. LUCIE, FL 34952 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: MGRM ( ) Delete  
Name: POST, KATHERINE E  
Address: 146 N.W. CENTRAL PARK PLAZA STE. 102  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: MGRM ( ) Delete  
Name: JOHNSTON, JIM  
Address: 632 DAHLIA LANE  
City-St-Zip: VERO BEACH, FL 32963

Title: MGRM ( ) Delete  
Name: POST, LULA MAE  
Address: 1175 SE CORAL REEF ST.  
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: MGRM ( ) Delete  
Name: JOHNSTON, JANICE  
Address: 632 DAHLIA LANE  
City-St-Zip: VERO BEACH, FL 32963

Title: MGRM ( ) Delete  
Name: POST, ONNO ROBERT  
Address: 146 N.W. CENTRAL PARK PLAZA STE. 102  
City-St-Zip: PORT ST. LUCIE, FL 34986

## 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:

Title: MGMR (X) Change ( ) Addition  
Name: JOHNSTON, JANICE  
Address: 632 DAHLIA LANE  
City-St-Zip: VERO BEACH, FL 32963

Title: MGMR (X) Change ( ) Addition  
Name: POST, ONNO ROBERT  
Address: 1175 SE CORAL REEF  
City-St-Zip: PORT ST. LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify 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: KATHERINE E POST

MGMR

03/20/2009

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