

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000006870

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** JOHNSON CONSTRUCTION LTD. CO.

**Current Principal Place of Business:**

6855 SWEET BAY CT  
COCOA,, FL 32927

**New Principal Place of Business:**

6214 HARBOR HEIGHTS PKWAY  
MUKILTEO, WA 98275

**Current Mailing Address:**

6855 SWEET BAY CT  
COCOA,, FL 32927

**New Mailing Address:**

6214 HARBOR HEIGHTS PKWAY  
MUKILTEO, WA 98275

**FEI Number:** 02-0765372

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, FRED RANDALL  
6855 SWEETBAY CT.  
COCOA, FL., FL 32927 US

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

JOHNSON, FRED RANDALL  
6214 HARBOR HEIGHTS PKWAY  
MUKILTEO, WA., FL 98275 US

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: FRED R. JOHNSON

04/12/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: JOHNSON, FRED RANDALL  
Address: 6214 HARBOR HEIGHTS PKWAY  
City-St-Zip: MUKILTEO, WA 98275

Title: MGR  
Name: JOHNSON, SALLIE EUGENIA  
Address: 6214 HARBOR HEIGHTS PKWAY  
City-St-Zip: MUKILTEO, WA 98275

Title: MGR  
Name: JOHNSON, MICHAEL ANDREW  
Address: 6214 HARBOR HEIGHTS PKWAY  
City-St-Zip: MUKILTEO, WA 98275 US

Title: MGR  
Name: JOHNSON, SCOTT RANDALL  
Address: 6214 HARBOR HEIGHTS PKWAY  
City-St-Zip: MUKILTEO, WA 98275

I hereby 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: FRED R JOHNSON

MGR

04/12/2012

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