

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089167

FILED
Apr 09, 2007
Secretary of State

Entity Name: JOHNSON HOME RENTALS, LLC

Current Principal Place of Business:

201 1ST STREET E #1121
CONOVER, NC 28613 US

New Principal Place of Business:

Current Mailing Address:

201 1ST STREET E #1121
CONOVER, NC 28613 US

New Mailing Address:

FEI Number: 20-5528692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVENDER, KYLE
873 WESTBAY DRIVE
105
LARGO, FL 33770 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: JOHNSON, PATRICK
Address: P.O. BOX 1121
City-St-Zip: CONOVER, NC 28613 US

Title: MGRM () Delete
Name: JOHNSON, KARRI
Address: P.O. BOX 1121
City-St-Zip: CONOVER, NC 28613 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM () Change (X) Addition
Name: PEARSON, AMANDA
Address: P.O. BOX 1121
City-St-Zip: CONOVER, NC 28613 US

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 JOHNSON

MGMR

04/09/2007

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