2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 08, 2009
Secretary of State

DOCUMENT# L08000076166

Entity Name: JOHNSON-ADAMS & ASSOCIATES, LLC

Current Principal Place of Business:

3212 ALCOTT AVENUE
PLANT CITY, FL 33566

New Principal Place of Business:

Current Mailing Address:

3212 ALCOTT AVENUE
PLANT CITY, FL 33566

New Mailing Address:

FEI Number: 26-3142489 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LASMAN, JEFFREY M ESQ.
C/O LASMAN LAW FIRM, P.A.
6152 DELANCEY STATION STREET, SUITE 205
RIVERVIEW, FL 33578 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, SHERMAN L	
Address:	3212 ALCOTT AVENUE	
City-St-Zip:	PLANT CITY, FL 33566	
Title:	MGRM	( ) Delete
Name:	ADAMS, WILLIAM R III	
Address:	3212 ALCOTT AVENUE	
City-St-Zip:	PLANT CITY, FL 33566	
Title:	MGRM	( ) Delete
Name:	ADAMS, CATHERINE M	
Address:	3212 ALCOTT AVENUE	
City-St-Zip:	PLANT CITY, FL 33566	

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 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: WILLIAM R. ADAMS, III MGRM 03/08/2009

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