

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L11883

(0)

1. Corporation Name

JOHNSON INSTALLATION, INC.



Principal Place of Business

3450 EAST LAKE ROAD  
SUITE 301  
PALM HARBOR FL 34685

Mailing Address

3450 EAST LAKE ROAD  
SUITE 301  
PALM HARBOR FL 34685

3. Date Incorporated or Qualified

08/28/1989

3a. Date of Last Report

07/13/1995

4. FEI Number

59-3009884

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

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Zip

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Country

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9. Name and Address of Current Registered Agent

COSNOW, JEFFREY E.  
3450 EAST LAKE ROAD  
SUITE 301  
PALM HARBOR FL 34685

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent, if different from above

(NOTE: If signed, Agent signature must be written here.)

(Date)

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PO  
JOHNSON, ORVILLE  
2949 GLENPARK RD  
PALM HARBOR FL

☐ DELETE

TITLE

NAME

STREET ADDRESS

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