

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L43771

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: JOHNSON, AUVIL, BROCK & WILSON, P.A.

## Current Principal Place of Business:

37837 MERIDIAN AVE  
STE 100  
DADE CITY, FL 33525 US

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 2337  
DADE CITY, FL 33526 US

## New Mailing Address:

FEI Number: 59-2985033

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, LEONARD H.  
37837 MERIDIAN AVE  
SUITE 314  
DADE CITY, FL 33525 US

## Name and Address of New Registered Agent:

JOHNSON, LEONARD H.  
37837 MERIDIAN AVE  
SUITE 100  
DADE CITY, FL 33525 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:

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: JOHNSON, LEONARD H.,  
Address: 37837 MERIDIAN AVE STE 100  
City-St-Zip: DADE CITY, FL 33525

Title: DT ( ) Delete  
Name: AUVIL, JON L  
Address: 37837 MERIDIAN AVE STE 100  
City-St-Zip: DADE CITY, FL 33525

Title: DVP ( ) Delete  
Name: BROCK, P HUTCHISON II  
Address: 37837 MERIDIAN AVE STE 100  
City-St-Zip: DADE CITY, FL 33525

Title: DS ( ) Delete  
Name: WILSON, JAMES R  
Address: 37837 MERIDIAN AVENUE, SUITE 100  
City-St-Zip: DADE CITY, FL 33525

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ( ) 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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEONARD H. JOHNSON

DP

01/21/2009

Electronic Signature of Signing Officer or Director

Date