

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000003145

Entity Name: JOHNSTON ISLAND, LC

FILED
Aug 24, 2005
Secretary of State

Current Principal Place of Business:

14001 ATLANTIC BOULEVARD
JACKSONVILLE, FL 32225

New Principal Place of Business:

Current Mailing Address:

3218 NORTHEAST 29TH STREET
GRESHAM, OR 97030

New Mailing Address:

PO BOX 716
HAVRE DE GRACE, MD 21078

FEI Number: 59-3582626 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 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: MGR () Delete
Name: JOHNSTON, WILLIAM H
Address: 3218 NORTHEAST 29TH STREET
City-St-Zip: GRESHAM, OR 97030

Title: MGR () Delete
Name: JOHNSTON, DIANE L
Address: 3218 NORTHEAST 29TH STREET
City-St-Zip: GRESHAM, OR 97030

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JOHNSTON, WILLIAM H
Address: PO BOX 716
City-St-Zip: HAVRE DE GRACE, MD 21078

Title: MGR (X) Change () Addition
Name: JOHNSTON, DIANE L
Address: PO BOX 716
City-St-Zip: HAVRE DE GRACE, MD 21078

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 JOHNSTON

MGR

08/24/2005

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