

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010134

FILED
Apr 03, 2009
Secretary of State

Entity Name: MAJOHNSON ASSOCIATES, INC

Current Principal Place of Business:

1084 55TH TERR S
ST PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

1084 55TH TERR S
ST PETERSBURG, FL 33705

New Mailing Address:

FEI Number: 16-1674261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, MARY ANN
1084 55TH TERR S
ST PETERSBURG, FL 33705 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOHNSON, MARY ANN
Address: 1084 55TH TERR S
City-St-Zip: ST PETERSBURG, FL 33705

Title: VD () Delete
Name: EDWARDS, ANNIE RUTH
Address: 2121 PINELLAS PT. DR. S.
City-St-Zip: ST. PETERSBURG, FL 33704

Title: D () Delete
Name: WELLS, IRVING B
Address: 2185 67TH AVE. S.
City-St-Zip: ST. PETERSBURG, FL 33704

Title: D () Delete
Name: AYERS, ANNA M
Address: 3001 58TH AVE. SOUTH
City-St-Zip: ST. PETERSBURG, FL 33712

Title: D () Delete
Name: JENKINS, THEODORE JR.
Address: 6267 38TH STREET
City-St-Zip: BRADENTON, FL 34203

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARYANN JOHNSON

PRES

04/03/2009

Electronic Signature of Signing Officer or Director

Date