2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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1. Entity Nam JOHNS G		SOCIATION, INC.									
920 THIRD STREET 9 STE B S			920 THIRD ST Ste B	Mailing Address 920 THIRD STREET STE B NEPTUNE BEACH, FL 32266				1861 1881 886 8801 8 8			TIIBI BJ 1823
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03232006	Chg-NP	CR2E0	37 (11/05)	
City & State			City & State				4. FEI Number 59-3472421				oplied For ot Applicable
Zip	Country		Zip	Zip Co		5. Certificate of Status Desired			\$8.75 Additional Fee Required		
6. Name and Address of Current Regists			t Registered Agent				7. Name and	Address of New I	Registered	Agent	
WALLACE 920 THIRD STE B NEPTUNE	STREET	-			Street Ad	ddress (F	P.O. Box Number	r is Not Acceptab	le)		
					City				FL	Zip Cod	le
	named entit tions of regist	y submits this statement f tered agent.	or the purpose of ch	anging its regist	tered office or	registere	ed agent, or both	n, in the State of F			and accept
SIGNATURE		or printed name of registered ager	it and title if applicable.	(NOTE: Regist	tered Agent signatu	we required	when reinstating)		DATE		
	_		I	ection Campaigr ust Fund Contrib	_		\$5.00 May Be Added to Fees			k payable t	
10.	Due by N		Tr	ust Fund Contrib	_	<u> </u>	Added to Fees		rida Depa	rtment of S	tate
TITLE NAME STREET ADDRESS	PD HERZOG 132 JOHN	OFFICERS AND D OFFICERS AND D GREGORY M NS GLEN DRIVE	Tr IRECTORS	ust Fund Contrib	Dution. 1. ITLE LAME STREET ADDRESS	<u> </u>	Added to Fees	Flo	rida Depa	rtment of S	tate
TITLE NAME	PD HERZOG 132 JOHN JACKSON SD CLUTE, L 253 JOHN	OFFICERS AND D OFFICERS AND D , GREGORY M NS GLEN DRIVE NVILLE, FL 32259	Tr IRECTORS	ust Fund Contrib 1 Delete TI N S C Delete TI N S S	oution. 1. ITLE NAME	SD Ber 244	Added to Fees ODITIONS/CHA	NGES TO OFFICE	rida Depa ERS AND D	rtment of S IRECTORS IN Change Change	tate
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD HERZOG 132 JOHN JACKSON SD CLUTE, L 253 JOHN JACKSON 1VD FECTEAL 237 JOHN 237 JOHN	OFFICERS AND D OFFICE	IRECTORS	ust Fund Contrib Delete Ti N S C S C Delete Ti N S C	DUTION. 1. ITLE IAME ITREET ADDRESS ITY-SI-ZIP ITLE IAME ITREET ADDRESS	SD Ber 244	Added to Fees ODITIONS/CHA	Flooring Flo	rida Depa ERS AND D	rtment of S IRECTORS IN Change Change	tate N 10 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD HERZOG 132 JOHN JACKSON SD CLUTE, L 253 JOHN JACKSON TVD FECTEAL 237 JOHN JACKSON TD GLATT, B 177 JOHN	OFFICERS AND D OFFICE	IRECTORS	ust Fund Contrib Delete Ti N S C Delete Ti N S C C Delete Ti N S C C Delete Ti N S C C Delete Ti N S S C C	DUTION. 1. 1. ITLE MAME STREET ADDRESS STLY-ST-ZIP STREET ADDRESS STLY-ST-ZIP STREET ADDRESS STLY-ST-ZIP STLE MAME STREET ADDRESS STLY-ST-ZIP STLE MAME	SD Ber 244 Jac	en III,	nael Glen Dr Lle, FL Phillip	ive 32259	rtment of S IRECTORS IN Change Change Change	tate 10 Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD HERZOG 132 JOHN JACKSON SD CLUTE, L 253 JOHN JACKSON TVD FECTEAU 237 JOHN JACKSON TD GLATT, B 177 JOHN JACKSON 2VD ROBITZS 165 JOHN	OFFICERS AND D	IRECTORS	Ust Fund Contrib Delete Ti N S C Delete Ti N S C Delete Ti N S C C Delete Ti N S S C Delete Ti N S S C Delete Ti N S S Delete Ti N	DUTION. 1. 1. 1. 1. 1. 1. 1. 1. 1.	SD Ber 244 Jac	en III,	nael Glen Dr	ive 32259	rtment of S IRECTORS IN Change Change Change	tate 1 10 Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERZOG 132 JOHN JACKSON SD CLUTE, L 253 JOHN JACKSON TO GLATT, B 177 JOHN JACKSON 2VD ROBITZS 165 JOHN JACKSON TO ROBITZS	OFFICERS AND D OFFICE	IRECTORS	Ust Fund Contrib Delete Ti N S C C C Delete Ti N S C Delete Ti N Delete	DULION. 1. 1. 1. ITHE LAME LAM	SD Ber 244 Jaco	added to Fees ODDITIONS/CHA	Phillip Glen Dr	ive 32259	rtment of S IRECTORS IN Change Change Change Change	tate 1 10 Addition Addition Addition Addition Addition

irroricated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.