2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 02, 2007 08:00 AM Secretary of State

DOCUMENT # P00000033646

1. Entity Name

R.E. JOHNSON ENTERPRISES, INC.



Principal Place of Business

5113 COMBEE LANE SARASOTA, FL 34241 Mailing Address

5113 COMBEE LANE SARASOTA, FL 34241



DO NOT WRITE IN THIS SPACE

02152007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For Status Desired Sample Sam

6. Name and Address of Current Registered Agent

BARTLETT, CHARLES J 2033 MAIN ST., STE. 600 SARASOTA, FL 34237

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.						
SIGNATURE Signature: typed or printed name of registered agont and little if applicable. (NOTE: Registered Agent signature required when reinstating) OATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution				\$5.00 May Be Added to Fees		
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT D JOHNSON, RICHARD E JR. 5113 COMBEE LANE SARASOTA, FL 34241	TORS			######################################	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1 11			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under outh: that Lam an officer or director.						

indicated 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with at other powered.

SIGNATURE:

RICHARDAN WED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/07 Date

941)-924-6714