

FILED
Jul 14, 2003 8:00 am
Secretary of State

07-01-2003 90041 030 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000052337

1. Entity Name

William Johnson + Co, Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

P.O. Box 916 354

3. Mailing Address

SAME

Suite, Apt. #, etc.
Longwood

Suite, Apt. #, etc.

City & State

FL 32791

City & State

Zip

Country

Zip

Country

4. FEI Number

59-378994

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

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**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Deborah Johnson

Street Address (P.O. Box Number is Not Acceptable)

906 Little Bend Rd

Alt FL 32714

City

Deeronte Spring

FL

Zip Code

32714

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

Deborah Johnson

(NOTE: Registered Agent signature required when reappointing)

DATE

7/10/03

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Pres.
William Johnson
906 Little Bend Rd
Deeronte Spring, FL 32714

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DST
Deborah Johnson
906 Little Bend Rd
Deeronte Spring, FL 32714

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Deborah Johnson

6/24/03

Date

407-788-9213

Daytime Phone

CRZE034B (12/02)

- Attachment


PO1000052337

55051154

William Johnson & Co., Inc.


June 24, 2003

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir,

Enclosed please find a Uniform Business Report for William Johnson & Co., Inc. and a check. This report has been filed late due to change in address. We never received this and I came across paper work and realized this was coming due, so I called this office and they said it had gone out but mailed to a P.O. Box in Altamonte Springs which had been closed over a year ago. We could not understand why it did not come to the physical address. Please make note of the new mailing address. If I can be of any further assistance to you please feel free to call.

Thank you, for your cooperation in this matter!


Deborah Johnson

PO Box 91654 Longwood, FL 32791 407-788-9213