



FILED
Mar 07, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000087944			
1. Entity Name JOHNSON & JOHNSON WOOD PRODUCTS INC.			
Principal Place of Business 5948 STATE ROAD 66 SEBRING, FL 33872		Mailing Address 5948 STATE ROAD 66 SEBRING, FL 33872	
DO NOT WRITE IN THIS SPACE			
		01042008 No Chg-P CR2E034 (11/05)	
		4. FEI Number 65-1136098	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
JOHNSON, BRENDA 5948 STATE ROAD 66 SEBRING, FL 33872		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		P JOHNSON, CARL 5948 STATE ROAD 66 SEBRING, FL 33872	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		VSTD JOHNSON, BRENDA 5948 STATE ROAD 66 SEBRING, FL 33872	
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12. I hereby certify that the information supplied with this filing 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Brenda Johnson</i>		1-21-08 561 6626364	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	