

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000048542

Entity Name: GENE JOHNSON, INC.

FILED
Feb 16, 2005
Secretary of State

Current Principal Place of Business:

4 MILTON ST
ST AUGUSTINE, FL 32804

New Principal Place of Business:

Current Mailing Address:

4 MILTON ST
ST AUGUSTINE, FL 32804

New Mailing Address:

FEI Number: 02-0596565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNLAP, III, LUTHER D
4 MILTON ST
SAINT AUGUSTINE, FL 32084 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CMO () Delete
Name: DUNLAP, III, LUTHER D
Address: 4 MILTON ST
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: CTO () Delete
Name: BEASON, SCOTT M
Address: 3178 I HAYNES DR
City-St-Zip: GAINESVILLE, GA 30506

Title: CEO () Delete
Name: LAMERS, SUSANNA
Address: 311 HALE DR
City-St-Zip: THIBODAUX, LA 70301

Title: CTA () Delete
Name: COMPTON, ROBERT
Address: 9318 NE 128TH LANE
City-St-Zip: KIRKLAND, WA 98034

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUTHER D DUNLAP III

CMO

02/16/2005

Electronic Signature of Signing Officer or Director

_____ Date