

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Aug 30, 2007  
Secretary of State**

DOCUMENT# P03000018582

Entity Name: CLYDE JOHNSON CARPENTRY & ROOFING, INC.

**Current Principal Place of Business:**

1430 WAYMAN RD  
MOORE HAVEN, FL 33471

**New Principal Place of Business:**

700 W. SUGARLAND HIGHWAY  
CLEWISTON, FL 33440

**Current Mailing Address:**

PO BOX 216  
CLEWISTON, FL 33440

**New Mailing Address:**

FEI Number: 56-2314864      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JOHNSON, CLYDE D  
1430 WAYNAM ROAD  
MOORE HAVEN, FL 33471      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

**OFFICERS AND DIRECTORS:**

Title: PT ( ) Delete  
Name: JOHNSON, CLYDE D  
Address: 1430 WAYMAN RD  
City-St-Zip: MOORE HAVEN, FL 33471

Title: S ( ) Delete  
Name: JOHNSON, SHANAN M  
Address: 1430 WAYMAN RD  
City-St-Zip: MOORE HAVEN, FL 33471

Title: VP ( ) Delete  
Name: MERCER, DAVID R  
Address: 620 W. EL PASO  
City-St-Zip: CLEWISTON, FL 33440 US

**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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CLYDE D. JOHNSON

PT

08/30/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date