

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000080538

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** A. MICHAEL JOHNSON, P.A.

**Current Principal Place of Business:**

1205 PIPER BLVD  
SUITE 202  
NAPLES, FL 34110

**New Principal Place of Business:**

**Current Mailing Address:**

1205 PIPER BLVD  
SUITE 202  
NAPLES, FL 34110

**New Mailing Address:**

7157 MILL RUN CIRCLE  
NAPLES, FL 34109

**FEI Number:** 20-0111772

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, A.MICHAEL  
1205 PIPER BLVD  
SUITE 202  
NAPLES, FL 34110 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:** PSTD  
**Name:** JOHNSON, A. MICHAEL  
**Address:** 7157 MILL RUN CIRCLE  
**City-St-Zip:** NAPLES, FL 34109

I hereby 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 all other like empowered.

**SIGNATURE:** A MICHAEL JOHNSON

PSTD

04/29/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date