2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P03000099987

1. Entity Name
JOSHUA C. JOHNSON BUILDER, INC.

FILED
2008 SEP 19 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
4032 N. ACCESS RD ENGLEWOOD, FL 34224 US	4032 N ACCESS ROAD ENGLEWOOD, FL 34224 US

09172008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 14-1897349 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JOHNSON, CINDY A 50 SPORTSMAN CIRCLE ROTONDA WEST, FL 33947	Name: Cindy A. Johnson Street Address (P.O. Box Number is Not Acceptable): 4032 N Access Rd. City: Englewood FL Zip Code: 34224

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: Cindy A. Johnson DATE: 9/17/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Amended AR is $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRES JOHNSON, JOSHUA C 4032 N. ACCESS ROAD ENGLEWOOD, FL 34224	☒ Change	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/S/D Cindy A. Johnson 4032 N Access Rd., Englewood, FL 34224 ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECR JOHNSON, CINDY A 50 SPORTSMAN CIRCLE ROTONDA WEST, FL 33947	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/T/D Neall Johnson 4032 N Access Rd., Englewood, FL 34224 ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 500136271585 09/23/08--01050--009 **70.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Cindy A. Johnson 9/17/08 (941)697-7049
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #