

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 22, 2004 8:00 am
Secretary of State

03-22-2004 90299 038 ***150.00

DOCUMENT # P03000131967

1. Entity Name

JOHNSON BROTHERS INSULATION, INC.



Principal Place of Business

16734 SKILLET ROAD
CLERMONT FL 34711

Mailing Address

16734 SKILLET ROAD
CLERMONT FL 34711

J4U04410



MOORE CR2E034 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-0408724

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, ROGER W
137 CREEKSIDE WAY
ORLANDO FL 32824

7. Name and Address of New Registered Agent

Name

Roger W. JOHNSON

Street Address (P.O. Box Number is Not Acceptable)

1351 DARNABY WAY

City

ORLANDO

FL

Zip Code

32824

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME JOHNSON, KENNETH R
STREET ADDRESS 16734 SKILLET ROAD
CITY-ST-ZIP CLERMONT FL 34711

TITLE V ☐ Delete
NAME JOHNSON, ROGER W
STREET ADDRESS 137 CREEKSIDE WAY
CITY-ST-ZIP ORLANDO FL 32824

TITLE V ☐ Delete
NAME JOHNSON, TIMMIE W
STREET ADDRESS 9230 RICHMOND ROAD
CITY-ST-ZIP ST. CLOUD FL 34773

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☒ Change ☐ Addition
NAME Roger W. JOHNSON
STREET ADDRESS 1351 DARNABY WAY
CITY-ST-ZIP ORLANDO, FLA 32824

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Roger W. Johnson* / Roger W. JOHNSON

3-13-04

321-228-7092

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #