


2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000136983		
1. Entity Name JOHNSON FAMILY SNACK BAR 123, INC.		

Principal Place of Business 5800 RAMONA BLVD. JACKSONVILLE, FL 32205	Mailing Address 1890 KINGSLEY AVE. ORANGE PARK, FL 32073
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DO NOT WRITE IN THIS SPACE

FILED
06 MAY 10 PM 12:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02092006 No Chg-P CR2E034 (11/05)

4. FEI Number 20-0817365	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

SMITH HULSEY & BUSEY, P.A.
225 WATER ST., STE. 1800
JACKSONVILLE, FL 32202

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

<p>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</p>	<p>9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees</p>	<p>800075379568 28/06--01052--001 **200.00</p>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HUNTLEY, LOUIS L 1890 KINGSLEY AVE. ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HUNTLEY, LOUIS W 1890 KINGSLEY AVE. ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JOHNSON, JOE 1890 KINGSLEY AVE. ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:  L. Ward Huntley 4/20/06 904-276-3598

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR