2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000136983

Entity Name: JOHNSON FAMILY SNACK BAR 123, INC.

FILED Apr 14, 2009 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place of Business:	
	IONA BLVD. IVILLE, FL 32:	205		
Current N	lailing Addre	ss:	New Mailing Address:	
	SSLEY AVE. PARK, FL 320	073		
FEI Number	: 20-0817365	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address of	f New Registered Agent:
225 WATE	JLSEY & BUSE ER ST., STE. 1 IVILLE, FL 32:	800		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
SIGNATU	RE:			
Electronic Signature of Registered Age			ent	Date
Election Ca	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (HUNTLEY, LOI 1890 KINGSLE ORANGE PAR	EY AVE.	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	ST (HUNTLEY, LOI 1890 KINGSLE ORANGE PAR	EY AVE.	Title: Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	VP (JOHNSON, JO 1890 KINGSLE ORANGE PAR	EY AVE.	Title: Name: Address: City-St-Zip:	() Change () Addition

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: L. WARD HUNTLEY P 04/14/2009