2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000039941

Entity Name: THE JOHNS GROUP, INC.

FILED Jan 11, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1031 1ST ST S STE 806 1031 1ST ST S STE 806

JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32250 US

Current Mailing Address: New Mailing Address:

1031 1ST ST S STE 806 1031 1ST ST S STE 806

JACKSONVILLE BEACH, FL 32250 JACKSONVILLE BEACH, FL 32250 US

FEI Number: 32-0115890 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JOHNS, JAMES C
3842 REEDPOND DRIVE SOUTH
JOHNS, JAMES C
1031 1ST ST S

JACKSONVILLE, FL 32223 US JACKSONVILLE BEACH, FL 32250 US

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: 01/11/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D () Delete Title: P/D (X) Change () Addition Name: JOHNS, JAMES C Name: JOHNS, JAMES C

Address: 1031 1ST ST S 806 Address: 1031 1ST ST S STE 806

City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: VP/T () Delete Title: VP/T (X) Change () Addition

 Name:
 JOHNS, JAMES C
 Name:
 JOHNS, JAMES C

 Address:
 1031 1ST ST S 806
 Address:
 1031 1ST ST S STE 806

City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 JOHNS, JAMES C
 Name:
 JOHNS, JAMES C

 Address:
 1031 1ST ST S 806
 Address:
 1031 1ST ST S STE 806

City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE BEACH, FL 32250 US

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: JAMES C. JOHNS PRES 01/11/2009