2008 FOR PROFIT CORPORATION

Mar 17, 2008 08:00 A Secretary of State **ANNUAL REPORT** DOCUMENT # P05000136026 1. Entity Name JOHNNY SPENCER INC. Principal Place of Business Mailing Address 20824 NETTLETON STREET 20824 NETTLETON STREET ORLANDO, FL 32833 ORLANDO, FL 32833 02162008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-3601347 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SPENCER, JOHNNY DO NOT WRITE 20824 NETTLETON STREET ORLANDO, FL 32833 IN THIS SPACE 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 little if applicable DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS **PVST** TITLE NAME SPENCER, JOHNNY STREET ADDRESS 20824 NETTLETON STREET ORLANDO, FL 32833 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - 71P TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

FILED

Daytime Phone

12. I hereby certify that the information supplied with this filling 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. 407 568-4806 3-12-08 Johnny

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP