

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000121162

FILED  
Mar 03, 2007  
Secretary of State

Entity Name: ANDREW JOHNSON DESIGN SERVICES, INC.

## Current Principal Place of Business:

5093 KIRKWELL CIRCLE  
SPRING HILL, FL 34608 US

## New Principal Place of Business:

5093 KIRKWELL CIRCLE  
SPRING HILL, FL 34606 US

## Current Mailing Address:

5093 KIRKWELL CIRCLE  
SPRING HILL, FL 34608 US

## New Mailing Address:

5093 KIRKWELL CIRCLE  
SPRING HILL, FL 34606 US

FEI Number: 20-5580565

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, ANDREW W  
5093 KIRKWELL CIRCLE  
SPRING HILL, FL 34608 US

## Name and Address of New Registered Agent:

JOHNSON, ANDREW W  
5093 KIRKWELL CIRCLE  
SPRING HILL, FL 34606 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:

03/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: JOHNSON, ANDREW W  
Address: 5093 KIRKWELL CIRCLE  
City-St-Zip: SPRING HILL, FL 34608 US

Title: DVP ( ) Delete  
Name: JOHNSON, LACY L  
Address: 5093 KIRKWELL CIRCLE  
City-St-Zip: SPRING HILL, FL 34608

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: JOHNSON, ANDREW W  
Address: 5093 KIRKWELL CIRCLE  
City-St-Zip: SPRING HILL, FL 34606 US

Title: DVP (X) Change ( ) Addition  
Name: JOHNSON, LACY L  
Address: 5093 KIRKWELL CIRCLE  
City-St-Zip: SPRING HILL, FL 34606

I hereby certify that the information supplied with this filing does not qualify for the 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: LACY JOHNSON

DVP

03/03/2007

Electronic Signature of Signing Officer or Director

Date