2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2008 8:00 am Secretary of State

Principal Place of Business	1. Entity Name CATJOHN INVESTMENTS INC									04-24-2008 9	901 23 0)41 ***150	0.00
Comparison	1500 E LEONARD ST			15	1500 E LEONARD ST			,					
City & State	2. Principal F	Mailing Address											
26 - 0.4 \$ \$ 7.37	Suite, Apt. #, etc.			S	Suite, Apt. #, etc.				04212008	Chg-P	CR2E	(034 (12/06)	
Secretary Country Zip Country Zip Country S. Certificate of Status Desired \$8.75 Addisional Fee Required Agent Agen	City & State			C	City & State						37		<u> </u>
MORRIS, JOE JR 1500 E LEONARD ST PENSACOLA, FL 32503 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 Depart, liped to entire the obligations of registered agent and six it excitable.	Zip Country		Z	Zip Coun		try					\$8.75 Add	ditional	
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Street Address (P.O. Box Number is Not Acceptable)		_					Name	MC	21091	GLANU	· J.		
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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 Signature, hypoto to printed heriter objects ogen and site if applicable. o/OTE Prejistered Agent signature reclaimed when remarking O4-21 - 2 C 0 &	ge di						150	00 E	E LEON	IARD ST	TRE.	ET	
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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	After M 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P MORRIS, 1500 E LE PENSACC VPS MORRIS, 1500 E LE	FEE IS \$150.00 8 Fee will be \$55 OFFICERS A JOE JR EONARD ST OLA, FL 32503 GLADYS J EONARD ST	50.00	9. Election Campa Trust Fund Cont TORS Qelete Delete Delete	ign Finar Iribution. 11. TITLI NAM STRE CITY TITLE NAM STRE	ET ADDRESS ST-ZIP	\$5.: Adde	ADDITIONS/C	HANGES TO OFF	FICERS AN	D DIRECTOR Change Change Change Change Change	S IN 11 Addition Addition Addition Addition

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.