

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000022329

FILED
Apr 30, 2003
Secretary of State

Entity Name: JOHNSON EZELL CORPORATION

Current Principal Place of Business:

18167 US HWY 19 N.
STE. 660
CLEARWATER, FL 33764 US

New Principal Place of Business:

Current Mailing Address:

18167 US HWY 19 N.
STE. 660
CLEARWATER, FL 33764 US

New Mailing Address:

FEI Number: 59-3174106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EZELL, NEIL
18167 U.S. HIGHWAY 19 NORTH
STE 660
CLEARWATER, FL 34624 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: JOHNSON, KELLY R
Address: 18167 US HWY 19 N., STE. 660
City-St-Zip: CLEARWATER, FL

Title: DP () Delete
Name: EZELL, NEIL
Address: 18167 US HWY 19 N., STE. 660
City-St-Zip: CLEARWATER, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NEIL EZELL

DP

04/30/2003

Electronic Signature of Signing Officer or Director

Date