

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Division of Corporations
Tallahassee, Florida 32399-0001
Telephone: 904-488-2000

APPROVED
AND
FILED

95 MAY 15 11 09:15

DOCUMENT # P93000044496 (6)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. C. JOHNSON COMPANY OF FLORIDA, INC.

4292 CORPORATE SQUARE SUITE C NAPLES FL 33942		4292 CORPORATE SQUARE SUITE C NAPLES FL 33942		DO NOT WRITE IN THIS SPACE	
2. Principal Office of Incorporation		2a. Mailing Address		3. Date of Incorporation or Qualification 06/23/1993	
21. State of Incorporation		26. State of Mailing Address		3a. Date of Last Report 02/22/1994	
22. Date of Report		27. Date of Mailing Address		4. FET Number 65-0415941	
23. City & State		28. City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24. City & State		29. City & State		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
25. City & State		30. City & State		8. This corporation has liability for intangible tax under 1991 (332) Florida Statutes ☒ Yes ☐ No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
LEBLANC, SUSAN 4292 CORPORATE SQUARE SUITE C NAPLES FL 33942				81. Name	
				82. Street Address (P.O. Box Number is Not Acceptable)	
				83. City	
				84. City	
				85. Zip Code	
11. I, the undersigned, being a resident of this state, do hereby certify that the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.					
SIGNATURE					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12					
14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 607.0505, Florida Statutes. I further certify that the information is based on the annual report or supplemental annual report as 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 on the list of officers or directors of the corporation or on an affidavit with an address.					
SIGNATURE: Susan L. LeBlanc SUSAN L. LEBLANC 05/11/95 613/643-3344 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESIDENT & TREASURER					