

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000058973

FILED  
Jul 09, 2008  
Secretary of State

Entity Name: JUSTIN C. JOHNSON & ASSOCIATES, P.A.

## Current Principal Place of Business:

4020 PARK ST NORTH  
STE 302  
SAINT PETERSBURG, FL 33709 US

## New Principal Place of Business:

## Current Mailing Address:

4020 PARK ST NORTH  
STE 302  
SAINT PETERSBURG, FL 33709 US

## New Mailing Address:

FEI Number: 59-3173417

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JOHNSON, JUSTIN C  
1135 S. PASADENA AVE., STE. 107  
ST. PETERSBURG, FL 33707 US

## Name and Address of New Registered Agent:

JOHNSON, JUSTIN C  
4020 PARK ST. NORTH  
SUITE 302  
ST. PETERSBURG, FL 33709 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:

07/09/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: JOHNSON, JUSTIN C.  
Address: 8449 BLIND PASS DR  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: S ( ) Delete  
Name: BAUERLEIN, ELIZABETH L.  
Address: 8449 BLIND PASS DR  
City-St-Zip: TREASURE ISLAND, FL 33706

## 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 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: JUSTIN C. JOHNSON

P

07/09/2008

Electronic Signature of Signing Officer or Director

Date