FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000010422 (1)**

1. Corporate Name
JOHN JOHNSON MOTORS, INC.

Principal Place of Business	Mailing Address
U.S. 19 NORTH PERRY FL 32347 NONE	U.S. 19 NORTH 4521 P.G.A Blvd PERRY FL 32347 Suite # 273. Palm Beach Gardens FL 33418

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/28/1994
3a. Date of Last Report:

2. Principal Place of Business — 21: NONE
2a. Mailing Address — 26: 4521 P.G.A Blvd,
Suite, Apt. #, etc — 22:
Suite, Apt. #, etc — 27: 273.
City & State — 23:
City & State — 28: Palm Beach Gardens, Fl.
Zip — 24:
County — 25:
Zip — 29: 33418
County — 30: Palm Beach.

4. FEI Number — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032. Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BISHOP, CONRAD C III
411 NORTH WASHINGTON STREET
PERRY FL 32347

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, 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: (Signature, typed or printed name of registered agent and title if applicable) (DATE: Registered Agent signature required when mandatory) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	☒ Change ☐ Addition — PD
NAME	JOHNSON, JOHN H JR	12 NAME	Johnson John Sr.
STREET ADDRESS	131 BONNEY COURT	13 STREET ADDRESS	18 Grouvert.
CITY ST ZIP	BRIDGEWATER NJ 08807	14 CITY ST ZIP	Palm Beach Gardens, Fl. 33418
TITLE	STD	21 TITLE	☒ Change ☐ Addition — STD
NAME	JOHNSON, CARIN P	22 NAME	Johnson Carin P.
STREET ADDRESS	131 BONNEY COURT	23 STREET ADDRESS	18 Grouvert. Ct.
CITY ST ZIP	BRIDGEWATER NJ 08807	24 CITY ST ZIP	Palm Beach Gardens Fl 33418
TITLE	VD	31 TITLE	☐ Change ☐ Addition
NAME	JOHNSON, JOHN H SR	32 NAME	
STREET ADDRESS	43 WINDSOR LANE	33 STREET ADDRESS	
CITY ST ZIP	PALM BEACH GARDENS FL 33418	34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition — 500001475195
NAME		42 NAME	-05/04/95--01019--018
STREET ADDRESS		43 STREET ADDRESS	****200.00 ****200.00
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	5-1-95 tg

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John H Johnson, Vice Pres. — 4/23/95 — 407-622-8265
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

0400040 FP