

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

1995



FILED
SECRETARY OF STATE
OFFICE OF CORPORATIONS

95 MAY -1 PM 1:46

DOCUMENT # P94000048410 (2)

JOHNSON AND COLLIER ENTERPRISES, INC.

710 W. CENTRAL AVENUE
BLOUNTSTOWN FL 32424

P.O. BOX 421
BLOUNTSTOWN FL 32424

3. Filing Date (Date of Incorporation)	38. State of said request
06/24/1994	N/A
4. FIC Number	59-3283258
5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing	☐ \$5.00 May Be Added to Fees
7. This corporation has liability for information fee under § 192.01(2) Florida Statutes	☐ Yes ☒ No

21. D/B/A Kids Kingdom	26. 710 W. Central Avenue
22. 710 W. Central Avenue	27.
23.	28.
24.	29.
25.	30.

9. Name and Address of Current Registered Agent

COLLIER, BARBARA
222 E. SHERRY AVENUE
BLOUNTSTOWN FL 32424

10. Name and Address of New Registered Agent

81. Name	Collier, Barbara H. (Name Correction Only)
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL 85. Zip Code

11. The undersigned, this day of June, 1994, being duly sworn, depose and say: That the above named corporation submits this statement for the purpose of changing its registered office as prescribed in part 1 of 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 will comply with the provisions of law relating to the Florida Statutes.

12. OFFICERS AND DIRECTORS	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS, IF ANY
NAME PRESIDENT	NAME President Amy C. Johnson At J. Box 814 Blountstown, FL 32424
NAME VICE PRESIDENT	NAME Vice President Todd A. Johnson At J. Box 814 Blountstown, FL 32424
NAME VICE PRESIDENT	NAME Vice President Mark D. Collier 322 East Sherry Ave Blountstown, FL 32424
NAME SECRETARY / TREASURER	NAME Secretary / Treasurer Barbara H. Collier 322 East Sherry Ave Blountstown, FL 32424
NAME DIRECTOR	NAME DIRECTOR
NAME DIRECTOR	NAME DIRECTOR
NAME DIRECTOR	NAME DIRECTOR
NAME DIRECTOR	NAME DIRECTOR
NAME DIRECTOR	NAME DIRECTOR
NAME DIRECTOR	NAME DIRECTOR

REMITTED BY MAY 1

14. I, Barbara H. Collier, being duly sworn, depose and say: That the information supplied with this filing is voluntarily furnished and is true and correct for the corporation stated in the filing. I further certify that the information is correct for the current report or supplemental annual report as filed and is correct and that the corporation has been the same for the last 12 months under such that I am not aware of any change of the corporation or the officers or directors or persons who are required by the Florida Statutes, and that my name appears on the filing. I declare under penalty of perjury that the foregoing is true and correct.

SIGNATURE: *Barbara H. Collier*
Barbara H. Collier

04-25-95 904-674-4141