

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000051413

FILED  
Apr 24, 2006  
Secretary of State

Entity Name: KNOLYS JOHNSON, INC.

## Current Principal Place of Business:

3000 HIGH RIDGE RD, #16  
BOYNTON BEACH, FL 33426 US

## New Principal Place of Business:

3000 HIGH RIDGE RD.  
16  
BOYNTON BEACH, FL 33426 US

## Current Mailing Address:

3000 HIGH RIDGE RD, #16  
BOYNTON BEACH, FL 33426 US

## New Mailing Address:

3000 HIGH RIDGE RD.  
16  
BOYNTON BEACH, FL 33426 US

FEI Number: 65-0511166      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JOHNSON, KNOLYS  
639 N.E. 8TH AVENUE  
BOYNTON BEACH, FL 33435 US

## Name and Address of New Registered Agent:

JOHNSON, KNOLYS S  
639 N.E. 8TH AVENUE  
BOYNTON BEACH, FL 33435 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: KNOLYS S. JOHNSON

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: JOHNSON, KNOLYS  
Address: 3000 HIGH RIDGE RD #16  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: V ( ) Delete  
Name: JARAMILLO, GARTH  
Address: 3003 HIGH RIDGE ROAD, #16  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: S (X) Delete  
Name: JOHNSON, KNOLYS  
Address: 639 N.E. 8TH AVE  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: T (X) Delete  
Name: COLE, MARK  
Address: 3003 HIGH RIDGE ROAD, #16  
City-St-Zip: BOYNTON BEACH, FL 33435

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: JOHNSON, KNOLYS S P.  
Address: 3000 HIGH RIDGE RD #16  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: V. P (X) Change ( ) Addition  
Name: JOHNSON, SARAH A V.P.  
Address: 212 COLONY WAY WEST  
City-St-Zip: JUPITER, FL 33458 US

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 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: KNOLYS S. JOHNSON

P.

04/24/2006

Electronic Signature of Signing Officer or Director

Date