## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2008 08: 0 AN
Secretary of State

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1. Entity Name PHILLIP E. JOHNSON, INC.



Principal Place of Business

Meiling Address

1035 CONCERT WAY ROYAL PALM BEACH, FL 33411 1035 CONCERT WAY

ROYAL PALM BEACH, FL 33411

## DO NOT WRITE IN THIS SPACE

1112008 No Chg-P CR2E03

CR2E034 (11/05)

4. FEI Number 65-0930277 Applied Fr

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

JOHNSON, PHILLIP E 1035 CONCERT WAY ROYAL PALM BEACH, FL 33411

## DO NOT WRITE IN THIS SPACE

				, :			
	named entity submits this statement for the ptions of registered agent.	ourpose of changing its register	ed office ar re	gistered agent, or both	h, in the State of Florida. I am familiar with, and accept		
SIGNATURE.	Signature, typed or printed name of registered agent and size	I applicable. (NOTE: Registers	d Agent signature o	edjused when remediating)	DATE		
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS	1				
TITLE HAME STREET ADDRESS CITY-SY-ZIP	P JOHNSON, PHILLIP E 1035 CONCERT WAY WEST PALM BEACH, FL 33411	. dave	海绵州		U00000810291 02/08/08-80059-014 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	•					
TITLE NAME STREET ADDRESS CITY-ST-73P	·			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CRY-ST-ZIP				IN T	HIS SPACE		

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florios Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if the chapter 607.

SIGNATURE

TITLE
NAME
STREET ADDRESS
CITY-SI-JIP
TITLE
NAME
STREET ANDRESS

BIONATURE AND TYPED OR PRINTED NAME OF BIOMING OFFICER OR DIRECT

1/11/08 561-790-9