

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000093362

**FILED**  
**Mar 17, 2019**  
**Secretary of State**  
**5272982415CC**

**Entity Name:** BRUCE JOHNSON RESIDENTIAL CONTRACTOR, INC.

**Current Principal Place of Business:**

245 RIO VISTA DR.  
SOPCHOPPY, FL 32358

**Current Mailing Address:**

245 RIO VISTA DR.  
SOPCHOPPY, FL 32358

**FEI Number:** 01-0751972

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JOHNSON, BRUCE  
245 RIO VISTA DR.  
SOPCHOPPY, FL 32358 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P	Title	V
Name	JOHNSON, BRUCE	Name	JOHNSON, JANIE
Address	245 RIO VISTA DR.	Address	245 RIO VISTA DR.
City-State-Zip:	SOPCHOPPY FL 32358	City-State-Zip:	SOPCHOPPY FL 32358

*I hereby 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 all other like empowered.*

**SIGNATURE:** BRUCE JOHNSON

**PRESIDENT**

**03/17/2019**

Electronic Signature of Signing Officer/Director Detail

Date