

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$370)**

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED
95 JUL 31 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F15977 (4)

1. Corporation Name
E.A. JOHNSON ENTERPRISES, INC.

Principal Place of Business: 847 W LINDENWOOD CIRCLE, ORMOND BEACH FL 32174-4666
Mailing Address: 847 W LINDENWOOD CIRCLE, ORMOND BEACH FL 32174-4666

DO NOT WRITE IN THIS SPACE.

3. Date incorporated or Qualified: 01/23/1981
3a. Date of Last Report: 05/01/1994

4. FEI Number: 59-2167772
Applied For:
Not Applicable:

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing: \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business
21 740 N.E. 5TH AVE
22 UNIT # 6
23 CRYSTAL RIVER, FL
24 34428
25 CITRUS
26 740 N.E. 5TH AVE
27 UNIT 6
28 CRYSTAL RIVER, FL
29 34428
30 CITRUS

9. Name and Address of Current Registered Agent
JOHNSON, ERNEST A
847 W LINDENWOOD CIRCLE
ORMOND BEACH FL 32074

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

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: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

12. OFFICERS AND DIRECTORS	
TITLE	DPT
NAME	JOHNSON, ERNEST A
STREET ADDRESS	847 W LINDENWOOD CIR
CITY, ST, ZIP	ORMOND BCH FL
TITLE	AS
NAME	HAWORTH, ALFRED H
STREET ADDRESS	2323 BELLEAIR RD
CITY, ST, ZIP	CLEARWATER FL
TITLE	DVS
NAME	JOHNSON, C EVELYN
STREET ADDRESS	847 W LINDENWOOD CIR
CITY, ST, ZIP	ORMOND BCH FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1. TITLE	DPT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	JOHNSON, ERNEST A	
3. STREET ADDRESS	740 N.E. 5TH AVE UNIT 6	
4. CITY, ST, ZIP	CRYSTAL RIVER, FL 34428	
2. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	SAME	
3. STREET ADDRESS		
4. CITY, ST, ZIP		
3. TITLE	DVS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3. NAME	JOHNSON, C. EVELYN	
3. STREET ADDRESS	740 N.E. 5TH AVE UNIT 6	
3. CITY, ST, ZIP	CRYSTAL RIVER, FL 34428	
4. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. NAME		
4. STREET ADDRESS		
4. CITY, ST, ZIP		
5. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. NAME		
5. STREET ADDRESS		
5. CITY, ST, ZIP		
6. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME		
6. STREET ADDRESS		
6. CITY, ST, ZIP		

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 19.07(3)(b), 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 be in accordance with each 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 as an attachment with an address.

SIGNATURE: Ernest A. Johnson ERNEST A. JOHNSON
Date: 7/17/95
704 795-1477
N610400L

CR2E034 (3/95)