2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000055760

1. Entity Name
JONES PROPERTIES OF JACKSONVILLE, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 AUG 25 AM 8:00

Principal Place of Business
2550 HICKORY BLUFF LANE
JACKSONVILLE FL 32223

Mailing Address
2550 HICKORY BLUFF LANE
JACKSONVILLE FL 32223

2. Principal Place of Business	3. Mailing Address
1190 CUNNINGHAM CK. DR	1190 CUNNINGHAM CK. DR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: JACKSONVILLE, FL	City & State: JACKSONVILLE, FL
Zip: 32259-8962 Country: USA	Zip: 32259-8962 Country: USA

☒ CHECK HERE IF MAKING CHANGES MRD

4. FEI Number 59-3668306 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

AKEL, EDWARD C
1 INDEPENDENT DRIVE
SUITE 2301
JACKSONVILLE FL 32202

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $550.00
After September 10, 2003 Fee will be $750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONES, H. STEPHEN 2550 HICKORY BLUFF LANE JACKSONVILLE FL 32223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JONES, H. STEPHEN 1190 CUNNINGHAM CK. DR JACKSONVILLE, FL 32259-8962	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	100022635891 08/28/03--01032--021 **150.00	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 08/15/03 904230 1126
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (4/03)

Jones Properties of Jacksonville, Inc.

1190 Cunningham Creek Drive Jacksonville, FL 32259-8962 904-230-1126 Fax 904-230-1123 email: hstevejones@comcast.net

August 20, 2003

Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Please accept the enclosed filing fee for the referenced Florida Corporation. I did not receive the 2003 filing form due to a change of address. The new address has been corrected on the enclosed forms.

Thank you in advance for your consideration.

Sincerely,

Henry S. Jones
President / Director

Cc:file

Encl: check # 0637
UBR Form
Reinstatement Form