

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070542

FILED
Apr 17, 2006
Secretary of State

Entity Name: A. JONES & ASSOCIATES, INC

Current Principal Place of Business:

2815 NW 13TH STREET
SUITE 200
GAINESVILLE, FL 32609 US

New Principal Place of Business:

Current Mailing Address:

2815 NW 13TH STREET
SUITE 200
GAINESVILLE, FL 32609 US

New Mailing Address:

FEI Number: 20-1129957 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NALBANDIAN, ROPEN
2815 NW 13TH STREET
SUITE 423
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, ANITA B
Address: 2815 NW 13TH STREET
City-St-Zip: GAINESVILLE, FL 32609 US

Title: CEO () Delete
Name: NALBANDIAN, ROPEN
Address: 2815 NW 13TH STREET SUITE 423
City-St-Zip: GAINESVILLE, FL 32609

Title: ST () Delete
Name: BUICKEL, LINDA
Address: 2815 NW 13TH STREET SUITE 423
City-St-Zip: GAINESVILLE, FL 32609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANITA B JONES

P

04/17/2006

Electronic Signature of Signing Officer or Director

_____ Date