

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 197568

FILED
Oct 16, 2005
Secretary of State

Entity Name: JONES MANAGEMENT CORPORATION

Current Principal Place of Business:

513 OSCEOLA STREET
TALLAHASSEE, FL 32310 US

New Principal Place of Business:

Current Mailing Address:

513 OSCEOLA STREET
TALLAHASSEE, FL 32310 US

New Mailing Address:

2259 NW 16TH AVENUE
GAINESVILLE, FL 32605 US

FEI Number: 59-6063662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, EDWARD JR
513 OSCEOLA STREET
TALLAHASSEE, FL 32310 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JONES, EDWARD JR
Address: 513 OSCEOLA ST.
City-St-Zip: TALLAHASSEE, FL 32310

Title: TDA () Delete
Name: JONES, EDWARD JR
Address: 513 OSCEOLA STREET
City-St-Zip: TALLAHASSEE, FL 32310 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V/D () Change (X) Addition
Name: FREEMAN, VALERIE D
Address: 5531 NW 31 ST
City-St-Zip: GAINESVILLE, FL 32653 US

Title: S/D () Change (X) Addition
Name: DUKES, JOHN III
Address: 2259 NW 16TH AVE
City-St-Zip: GAINESVILLE, FL 32605 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN DUKES, III

S/D

10/16/2005

Electronic Signature of Signing Officer or Director

Date