2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State
03-24-2004 90044 028 ***158.75

DOCUMENT # 208454

1. Entity Name
JONES, WOOD & GENTRY, INC.

66415569

Principal Place of Business	Mailing Address
P.O.BOX 2367 136 E. ROBINSON ST. ORLANDO, FL 32802	P.O.BOX 2367 136 E. ROBINSON ST. ORLANDO, FL 32802

04212004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0820927
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GENTRY, DANIEL E
136 E. ROBINSON AVE.
ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

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

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GENTRY, CAROL E
STREET ADDRESS	3200 RAEFORD RD
CITY-ST-ZIP	ORLANDO, FL
TITLE	ST
NAME	EARLY, JOHN B
STREET ADDRESS	2801 DELLWOOD DR
CITY-ST-ZIP	ORLANDO, FL
TITLE	VP
NAME	GENTRY, DANIEL E
STREET ADDRESS	3200 RAEFORD ROAD
CITY-ST-ZIP	ORLANDO, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Carol E Gentry 4/21/04 407 841-2122
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

3/24/2004-90044-028-$158.75-$158.75

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Attachment

1664155569

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SIGNATURE: Daniel E Gentry 4/2/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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