


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2008 8:00 am
Secretary of State

02-12-2008 90019 027 ***150.00

DOCUMENT # 278073	
1. Entity Name COOPER & JONES, INC.	

Principal Place of Business 824 NORTH HIGHLAND AVENUE ORLANDO, FL 32803 US	Mailing Address 824 NORTH HIGHLAND AVENUE ORLANDO, FL 32803 US
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2. Principal Place of Business - No P.O. Box # 824 N. Highland Ave	3. Mailing Address 824 Highland Ave
Suite, Apt. #, etc. NA	Suite, Apt. #, etc. NA
City & State ORLANDO, FL	City & State ORLANDO FL
Zip 32803	Country ORANGE

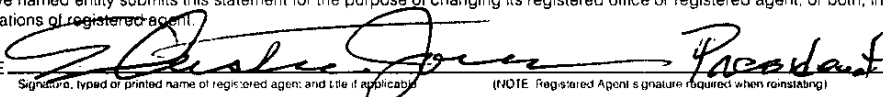
40023548



01312008 Chg-P CR2E034 (12/06)

4. FEI Number 59-1031712	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JONES, E. AUSTIN, JR. 824 NORTH HIGHLAND AVENUE ORLANDO, FL 32803	
7. Name and Address of New Registered Agent Name E. Austin Jr NA 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.

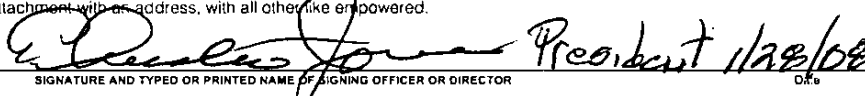
SIGNATURE  **President** DATE **2/28/08**

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, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JONES, AUSTIN E, JR P.O. BOX 2028 ORLANDO, FL 32802 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST JONES, LAURA D P.O. BOX 2028 ORLANDO, FL 32802 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **President** **1/28/08** **407-843-7862**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR OFF Daytime Phone #

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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Document Number 278073

Business Entity Name COOPER & JONES, INC.

FEI Number 59 - 1031712

FEI Number Status ☒ Listed Above ☐ Applied For ☐ Not ApplicableCertificate of Status Desired ☐ Yes ☒ No \$8.75 eachElection Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

Principal Place of Business

Address 824 NORTH HIGHLAND AVENUE (PO Box not acceptable)

Suite, Apt. #, etc.

City, State ORLANDO FL

Zip Code & Country 32803 US

Mailing Address

If your mailing address is the same as the principal address above, please check the box below. Otherwise, enter your mailing address.

☒ Mailing address same as principal address

Address 824 NORTH HIGHLAND AVENUE

Suite, Apt. #, etc.

City, State ORLANDO FL

Zip Code & Country 32803 US

Name And Address of Registered Agent

Name (Last, First, Middle, Title)

- OR -

Business to serve as RA JONES, E. AUSTIN, JR.

Street Address In Florida 824 NORTH HIGHLAND AVENUE (PO Box not acceptable)

Suite, Apt. #, etc.

City, State ORLANDO FL

Zip Code & Country 32803 US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

ATTACHMENT

40023548

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes.

298073

Officer/Director Name And Address**Name And Address #1**

Title

PD

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director JONES, AUSTIN E, JR

Street Address

P.O. BOX2028

City, State

ORLANDO

FL

Zip Code & Country

32802

Name And Address #2

Title

ST

Name (Last, First, Middle, Title)

JONES

LAURA

D

- OR -

Entity Name to serve as Officer/Director

Street Address

P.O. BOX 2028

City, State

ORLANDO

FL

Zip Code & Country

32802

Name And Address #3

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

Zip Code & Country

Name And Address #4

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as Officer/Director

Street Address

City, State

Zip Code & Country	ATTACHMENT		
Name And Address #5			
Title	<u>400 23548</u>		
Name (Last, First, Middle, Title)	# <u>298073</u>		
- OR -			
Entity Name to serve as Officer/Director			
Street Address			
City, State			
Zip Code & Country			
Name And Address #6			
Title			
Name (Last, First, Middle, Title)			
- OR -			
Entity Name to serve as Officer/Director			
Street Address			
City, State			
Zip Code & Country			
<p>An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.</p>			
Title	<u>PRESIDENT</u>		
Officer/Director Signature	<u>[Signature]</u>		
<p>This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes forgery under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.</p>			
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