

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 384594

Entity Name: JONES AVIATION SERVICE, INC.

FILED
Jul 19, 2007
Secretary of State

Current Principal Place of Business:

1234 CLYDE JONES ROAD
SARASOTA, FL 34243

New Principal Place of Business:

5325 ROYAL PALM AVE
SARASOTA, FL 34234

Current Mailing Address:

1234 CLYDE JONES ROAD
SARASOTA, FL 34243

New Mailing Address:

5325 ROYAL PALM AVE
SARASOTA, FL 34234

FEI Number: 59-1349365

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, CLYDE A
5325 ROYAL PALM AVE
SARASOTA, FL 34234 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JONES, CLYDE A
Address: 5325 ROYAL PALM AVE.
City-St-Zip: SARASOTA, FL

Title: VP () Delete
Name: JONES, SANDRA E
Address: 1553 MACKEREL AVENUE
City-St-Zip: SARASOTA, FL 34237

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JONES, CLYDE A
Address: 5325 ROYAL PALM AVE.
City-St-Zip: SARASOTA, FL 34234

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

I hereby certify that the information supplied with this filing does not qualify 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: CLYDE A. JONES

PD

07/19/2007

Electronic Signature of Signing Officer or Director

Date