

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 479352

Entity Name: JONFOR, INC.

FILED  
Feb 05, 2009  
Secretary of State

## Current Principal Place of Business:

12192 MANDARIN ROAD  
JACKSONVILLE, FL 32223

## New Principal Place of Business:

## Current Mailing Address:

12192 MANDARIN ROAD  
JACKSONVILLE, FL 32223

## New Mailing Address:

FEI Number: 59-1605401

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

J. NEIL ROOD  
12192 MANDARIN ROAD  
JACKSONVILLE, FL 32223 US

## Name and Address of New Registered Agent:

ROOD, J. NEIL P  
12192 MANDARIN ROAD  
JACKSONVILLE, FL 32223 US

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: J. NEIL ROOD

02/05/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PT ( ) Delete  
Name: ROOD, J. NEIL,  
Address: 12192 MANDARIN RD  
City-St-Zip: JACKSONVILLE, FL

Title: V ( ) Delete  
Name: ROOD, KAROL KAY,  
Address: 12192 MANDARIN RD  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: ROOD, J. NEIL,  
Address: 12192 MANDARIN RD  
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete  
Name: ROOD, KAROL KAY,  
Address: 12192 MANDARIN RD  
City-St-Zip: JACKSONVILLE, FL

Title: V ( ) Delete  
Name: MORROW, ANNE,  
Address: 12246 MANDARIN RD.  
City-St-Zip: JACKSONVILLE, FL

## 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:

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 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: J. NEIL ROOD

PRES

02/05/2009

Electronic Signature of Signing Officer or Director

Date