

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 848992

FILED
Apr 05, 2005
Secretary of State

Entity Name: STANLEY JONES, CORPORATION

Current Principal Place of Business:

119 MORRIS STREET
SOUTH FULTON, TN 38257 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5260
SOUTH FULTON, TN 38257 US

New Mailing Address:

FEI Number: 62-0722294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JONES, JOHN C.,
Address: 7079 JONES LANE
City-St-Zip: SOUTH FULTON, TN 38257

Title: PD () Delete
Name: JONES, STANLEY II G.
Address: RT 2 BOX 323
City-St-Zip: SOUTH FULTON, TN 38257

Title: V () Delete
Name: FRAZIER, GEORGE,
Address: WELLS AVENUE
City-St-Zip: FULTON, KY

Title: V () Delete
Name: BARCLAY, TED,
Address: ROUTE 5, BOX 345
City-St-Zip: SOUTH FULTON, TN

Title: ST () Delete
Name: MILNER, MICHAEL G.
Address: 119 MORRIS STREET
City-St-Zip: SOUTH FULTON, TN

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 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: MICHAEL G. MILNER

ST

04/05/2005

Electronic Signature of Signing Officer or Director

Date