## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

F93000001615 (4)

DOCUMENT # JONES CHEMICALS, INC.

Principal Place of Business	Mailing Address			
80 MUNSON STREET	80 MUNSON STREET			
LE ROY NY 14462	LE ROY NY 14482			

## **FILED** Mar 03 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address				4 1001100 still tolde titte Abeit batte affre anti-	1 11919 81191	·	
80 MUNSON		80 MUNSON STREET							
LE ROY NY 14482		LE ROY NY 14482							
						DO NOT WRITE IN THIS	3PACE		
						<ol> <li>Date Incorporated or Qualified</li> <li>04/01/1993</li> </ol>			
2. Principal P	Place of Business	2a, Mailing Address				4. FEI Number		Applied For	
21		26				16-0809645		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.7	5 Additional	
22		27				6, Certificate of Status Desired	Fee	Required	
City & Stat	te	City & State				6. Election Campaign Financing	\$5.00 May Be		
23		28	т -			Trust Fund Contribution	Adde	ed to Fees	
Zip	Country	Ζip	-	untry		8. This corporation owes or has paid the cur		_ `	
24	25	29	30	r			Yes	∐ No	
	9, Name and Address of Curr	······		81	Name	10. Name and Address of New Registered	Agent		
	PROPORATION SERVICE COMPA	NY .		<b> °</b> '	name				
	01 HAYS STREET			82	Street	Address (P.O. Box Number is Not Acceptable)			
IA	LLAHASSEE FL 32301								
				83					
				84	City		85 Z	ip Code	
					•	<u>FL</u>		<u>'</u>	
office or r	registered agent, or both, in the Sta am familiar with, and accept the obl	te of Florida. Such change was	authorize	d by	the corp	I corporation submits this statement for the purpose of poration's board of directors. I hereby accept the app	changing pintment	as registered	
SIGNATURE	Signature, typed or printed name of registered a	AVX	C. Davista	44		e required when reinstating) DATE			
12.		ND DIRECTORS	13.	o Agei	it signature	ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	ORS IN 12	
TITLE	1	DELETE	1.1 Ti	TI F		D/C/P/CEO		e YY Addition	
NAME	JONES, MARJORIE	_	1.2 N	AME		Jeffery W. Jones		AR	
STREET ADDRESS	298 PARK PLACE				ADDRESS				
CITY-ST-ZIP	CALEDONIA NY			ITY-S1		80 Munson Street			
TITLE	D	☐ DELET <b>É</b>	2.1 TI		- ZIF	LeRoy, NY 14482	☐ Chang	e Addition	
NAME	RIZZO, SELBY		2.2 N			VP/T/CFO/D	والمال السا	XX	
STREET ADDRESS	78 EAST MAIN ST					Raymond C. Buckley			
	LEROY NY					80 Munson Street			
CITY-ST-ZIP TITLE	8	DELETE	3.1 TI	TLE	1 · Z/P	LeRoy, NY 14482	☐ Chang	e Addition	
	BRUMBER, K R	ET percit					credy	e Monnou	
NAME .	8 ALLENVIEW DRIVE		3.2 N/		BBBBB				
STREET ADDRESS	BATAVIA NY 14020				ADDRESS				
CITY-ST-ZIP	VCD VCD	DELETE		ITY-SI	I - ZIP		Chara	o Additio	
TITLE	PRICOLA, VITO	□ DETEIF	4.1 TI				Chang	e 🔲 Addition	
NAME	10 BOGUE AVENUE		4. 2 N						
STREET ADDRESS			1		ADDRESS				
CITY - ST - ZIP	BATAVIA NY 14020	T beces	_	TY-ST	- ZIP				
TITLE	D D	☐ DELET <b>E</b>	5.1 TI				☐ Change	e 🔲 Addition	
NAME	JONES, R B	DOAD	5.2 N	AME					
STREET ADDRESS	TADMOR FARMS, NATIONS	HUAU	5.3 ST	REET #	ADDRESS				
CITY-ST-ZIP	AVON NY 14414		5.4 CI	TY-ST	- ZIP				
TITLE	D	☐ DELETE	6.1 TI	TLE			Changi	e 🔲 Addition	
NAME	SHERWOOD, ELIZABETH J		. 6.2 N/	AME					
STREET ADDRESS	2819 DENOON ROAD		6.3 \$1	REET A	ODRESS				
	CALEDONIA NY 14423		1						

14. 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 annual report or supplemental annual 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 ecceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or of an attach int with an appears.