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Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90024 032 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000001615

1. Corporation Name
JONES CHEMICALS, INC.



Principal Place of Business

80 MUNSON STREET
LE ROY NY 14482

Mailing Address

80 MUNSON STREET
LE ROY NY 14482

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/01/1993

4. FEI Number

16-0809645

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE

NAME JONES, MARJORIE
STREET ADDRESS 298 PARK PLACE
CITY-STATE-ZIP CALEDONIA NY

TITLE D ☒ DELETE

NAME RIZZO, SELBY
STREET ADDRESS 78 EAST MAIN ST
CITY-STATE-ZIP LEROY NY

TITLE DCPC ☐ DELETE

NAME JONES, JEFFERY W.
STREET ADDRESS 80 MUNSON STREET
CITY-STATE-ZIP LEROY NY 14482

TITLE VCD ☒ DELETE

NAME PRICOLA, VITO
STREET ADDRESS 10 BOGUE AVENUE
CITY-STATE-ZIP BATAVIA NY 14020

TITLE D ☒ DELETE

NAME JONES, R B
STREET ADDRESS TADMOR FARMS, NATIONS ROAD
CITY-STATE-ZIP AVON NY 14414

TITLE D ☒ DELETE

NAME SHERWOOD, ELIZABETH J
STREET ADDRESS 2819 DENOON ROAD
CITY-STATE-ZIP CALEDONIA NY 14423

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

John C Curran John C Curran

4/16/99

(716) 538-2314

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/98)