

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002999

FILED
Apr 13, 2007
Secretary of State

Entity Name: JONES BROS., INC., OF TENNESSEE

Current Principal Place of Business:

5760 OLD LEBANON DIRT ROAD
MT JULIET, TN 37122

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 727
MT. JULIET, TN 37121

New Mailing Address:

FEI Number: 62-0721049

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: P () Delete
Name: MCCULLOCH, M D
Address: 4395 HICKORY RIDGE ROAD
City-St-Zip: LEBANON, TN 37087

Title: VP () Delete
Name: MCCULLOCH, ROBERT S
Address: 1030 SMITH RD.
City-St-Zip: LEBANON, TN 37087

Title: S () Delete
Name: MCGREEVY, ROBERT E
Address: 1003 BRANDON COURT
City-St-Zip: MOUNT JULIET, TN 37122

Title: VP (X) Delete
Name: SULLIVAN, TOM
Address: 518 KIPPLING WAY
City-St-Zip: DURHAM, NC 27713

Title: VP (X) Delete
Name: HINSON, KEVIN W
Address: 500 BEECH CT.
City-St-Zip: BURNS, TN 37029

Title: COO (X) Delete
Name: MARTIN, ROGER C
Address: 6637 STANDING BAY RD
City-St-Zip: COLUMBUS, GA 31904

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
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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 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: M. DALE MCCULLOCH

P

04/13/2007

Electronic Signature of Signing Officer or Director

_____ Date