

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G52623

FILED
Apr 13, 2009
Secretary of State

Entity Name: GEORGE JONES PAINTING, INC.

Current Principal Place of Business:

87 CITY PARK AVE
SAINT MARKS, FL 32355

New Principal Place of Business:

Current Mailing Address:

PO BOX 194
SAINT MARKS, FL 32355

New Mailing Address:

FEI Number: 59-2305438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, GEORGE
87 CITY PARK AVENUE
SAINT MARKS, FL 32355 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: PD () Delete
Name: JONES, GEORGE
Address: 87 CITY PARK AVE.
City-St-Zip: TALLAHASSEE, FL

Title: VSD () Delete
Name: JONES, GAIL
Address: 87 CITY PARK AVE
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GEORGE JONES

PD

04/13/2009

Electronic Signature of Signing Officer or Director

Date