

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G70919

FILED  
Feb 27, 2008  
Secretary of State

Entity Name: PROFESSIONAL OFFICE PRODUCTS, INC.

## Current Principal Place of Business:

6600-5 YOUNGERMAN CIRCLE  
JACKSONVILLE, FL 32244 US

## New Principal Place of Business:

8188 BAYMEADOWS WAY WEST  
JACKSONVILLE, FL 32256 US

## Current Mailing Address:

6600-5 YOUNGERMAN CIR  
JACKSONVILLE, FL 32244 US

## New Mailing Address:

8188 BAYMEADOWS WAY WEST  
JACKSONVILLE, FL 32256 US

FEI Number: 59-2339969

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, DAVID L.  
30 PLAYERS CLUB VILLAS  
PONTE VEDRA BEACH, FL 32082 US

## Name and Address of New Registered Agent:

JONES, DAVID L.  
602 THORNWOOD LANE  
ORANGE PARK, FL 32073 US

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:

02/27/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: JONES, DAVID L.,  
Address: 30 PLAYERS CLUB VILLAS  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VP ( ) Delete  
Name: JONES, HAROLD B.,  
Address: 4137 BRIDGEVILLE PLACE  
City-St-Zip: JACKSONVILLE, FL 32223

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: JONES, DAVID L.,  
Address: 602 THORNWOOD LANE  
City-St-Zip: ORANGE PARK, FL 32073

Title: VP (X) Change ( ) Addition  
Name: JONES, GLENDA S.,  
Address: 602 THORNWOOD LANE  
City-St-Zip: ORANGE PARK, FL 32073

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: DAVID L. JONES

OFFI

02/27/2008

Electronic Signature of Signing Officer or Director

Date