

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED****Apr 30, 2004 08:00 AM**
Secretary of State

DOCUMENT # H03830			
1. Entity Name J & B JOYNER, INC.			
Principal Place of Business 6503 LAZY ACRE RD PANAMA CITY, FL 32413		Mailing Address 6503 LAZY ACRE RD PANAMA CITY, FL 32413	
DO NOT WRITE IN THIS SPACE			
		04272004 No Chg-P CR2E034 (10/03)	
4. FEI Number 59-2416601		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
B. Name and Address of Current Registered Agent JOYNER, JEFF B. 6503 LAZY ACRE RD P.O. BOX 11062, WEST BAY STATION PANAMA CITY, FL 32413		DO NOT WRITE IN THIS SPACE	
6. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and one if applicable (NOTE: Registered Agent signature required when reissuing) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		U000000143391 04/30/04-80089-020 150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JOYNER, JEFF B. 6503 LAZY ACRE RD PANAMA CITY, FL	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST JOYNER, BETTY J 6503 LAZY ACRE RD PANAMA CITY, FL		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 807, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Betty J. Joyner</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4/29/04 850 233-5135 Date Daytime Phone #	