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FILED  
Mar 26 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L73495 (8)

1. Corporation Name

JONES ENTERPRISES OF BARTOW, INC.

Principal Place of Business

Mailing Address

% ELOUISE J. MITCHELL  
930 E TEE CIR  
BARTOW FL 33830

% ELOUISE J. MITCHELL  
930 E TEE CIR  
BARTOW FL 33830

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/14/1990

4. FEI Number

59-3047660

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

MITCHELL, ELOUISE J.  
930 E TEE CIR  
BARTOW FL 33830

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 NAME STREET ADDRESS CITY-ST-ZIP

P  
KATIE M JONES  
10 NE 214TH ST  
MIAMI FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TD  
WRIGHT, FLORA J.  
5140 MISTY LAKE DRIVE  
MULBERRY FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DM  
MITCHELL, ELOUISE J.  
930 E TEE CIR  
BARTOW FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SD  
WILLIAMS, GLORIA J.  
4060 OLD FAIRBURN RD  
COLLEGE PARK GA

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D  
JONES, ROOSEVELT  
1128 NOSTRAND AVE  
BROOKLYN NY

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VD  
JONES, MACK A.  
2125 HIGH POINT TRAIL SW  
ATLANTA GA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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.

SIGNATURE: *Eloise J. Mitchell* 3/18/98

CR2E034 (10/97)