2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000040968

Entity Name: JONES PAINTING INCORPORATED

FILED Jan 10, 2004 Secretary of State

_ y		ANTINO INCOME ON THE				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
705 SPENCER DRIVE FORT WALTON BEACH, FL 325472303				705 SPENCER DRIVE FORT WALTON BEACH, FL 32547 US		
Current Mailing Address:			New Maili	New Mailing Address:		
705 SPENCER DRIVE FORT WALTON BEACH, FL 325472303			705 SPENCER DRIVE FORT WALTON BEACH, FL 32547			
FEI Number:	59-3637869	FEI Number Applied For()	FEI Number Not App	licable () Certificate of S	tatus Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registere	ed Agent:	
	CER DRIVE	FL 325472303				
The above in the State		submits this statement for the p	urpose of changing i	ts registered office or registe	red agent, or both,	
SIGNATUR		is Cianatura of Dogistared Age	.	Data		
Election Cam		ic Signature of Registered Age Trust Fund Contribution ().	TIL	Date		
		,	ADDITION	IO/OLIANOEO TO OFFICER	0 AND DIDEOTOR	
OFFICERS	AND DIREC	IORS:	ADDITION	IS/CHANGES TO OFFICER	S AND DIRECTORS	
Title: Name: Address: City-St-Zip:	JONES, VICTO 705 SPENCER		Title: Name: Address: City-St-Zip:	()Change ()Add	ition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	O () Change (X) Add JONES, MYLE T 705 SPENCER DRIVE FORT WALTON BEACH, FL 325		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	O () Change (X) Add JONES, CHRISTOPHER 804 A SECOND AVENUE FORT WALTON BEACH, FL 325		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VICTOR BUD JONES D 01/10/2004