

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000100964

1. Entity Name

JEDNA PROPERTIES, INC.



Principal Place of Business

21534 TRUMPETER DR.
LAND O'LAKES, FL 34639

Mailing Address

21534 TRUMPETER DR.
LAND O'LAKES, FL 34639



01122004 No Chg-P CR2E034 (10/03)

4. FEI Number

59-3678567

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUNSTON, JOHN E JR
21534 TRUMPETER DR.
LAND O'LAKES, FL 34639

8. 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$350.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DUNSTON, JOHN E JR
STREET ADDRESS	21534 TRUMPETER DR.
CITY - ST - ZIP	LAND O'LAKES, FL 34639
TITLE	V
NAME	DUNSTON, JOHN E III
STREET ADDRESS	5039 RODRICK TRAIL
CITY - ST - ZIP	MARIETTA, GA 30066
TITLE	ST
NAME	DUNSTON, EDNA
STREET ADDRESS	21534 TRUMPETER DR.
CITY - ST - ZIP	LAND O'LAKES, FL 34639
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

U00000098890
03/29/04-80061-003 150.00

12. 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 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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/04

Date

813-996-8660

Daytime Phone #