2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2010
Secretary of State

DOCUMENT# P02000027899

Entity Name: ALVIN C. JONES, P.A.

Current Principal Place of Business:

4606 WHISPERING WIND AVE.
TAMPA, FL 33614

New Principal Place of Business:

8870 N. HIMES AVE.
248
TAMPA, FL 33614

Current Mailing Address:

P.O. BOX 271304
TAMPA, FL 33688

New Mailing Address:

8870 N. HIMES AVE.
248
TAMPA, FL 33614

FEI Number: 01-0644532 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, ALVIN C ESQUIRE
4606 WHISPERING WIND AVE.
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

JONES, ALVIN C ESQUIRE
8870 N. HIMES AVE.
248
TAMPA, FL 33614 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: ALVIN C. JONES 05/03/2010
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CP
Name: JONES, ALVIN C ESQUIRE
Address: 8870 N. HIMES AVE. #248
City-St-Zip: TAMPA, FL 33614

I hereby 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 all other like empowered.

SIGNATURE: ALVIN C. JONES CP 05/03/2010
Electronic Signature of Signing Officer or Director Date