
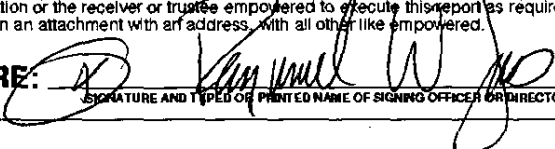


FILED
Aug 01, 2003 8:00 am
Secretary of State

08-01-2003 90057 045 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000088912																																																																																																																																			
1. Entity Name R. W. JONES, INC.																																																																																																																																			
Principal Place of Business 4345 S LAKE HIAWATHA DR LADY LAKE, FL 32159			Mailing Address 4345 S LAKE HIAWATHA DR LADY LAKE, FL 32159																																																																																																																																
2. Principal Place of Business			3. Mailing Address																																																																																																																																
Suite, Apt. #, etc.			Suite, Apt. #, etc.																																																																																																																																
City & State			City & State																																																																																																																																
Zip		Country	Zip		Country																																																																																																																														
4. FEI Number 59-3422545				Applied For <input type="checkbox"/> Not Applicable																																																																																																																															
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required																																																																																																																															
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent																																																																																																																																
JONES, RAYMOND W 4345 S LAKE HIAWATHA DR LADY LAKE, FL 32159			Name																																																																																																																																
			Street Address (P.O. Box Number is Not Acceptable)																																																																																																																																
			City FL Zip Code																																																																																																																																
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																																																																																																																			
FILE NOW!!! FEE IS \$450.00 After May 1, 2003 Fee will be \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State																																																																																																																																			
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																			
<table border="1"><thead><tr><th colspan="3">10. OFFICERS AND DIRECTORS</th><th colspan="3">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th></tr></thead><tbody><tr><td>TITLE</td><td>PD</td><td><input type="checkbox"/> Delete</td><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td>JONES, RAYMOND W</td><td></td><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td>4345 S LAKE HIAWATHA DR</td><td></td><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td>LADY LAKE, FL 32159</td><td></td><td>CITY-ST-ZIP</td><td></td><td></td></tr><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td><td>CITY-ST-ZIP</td><td></td><td></td></tr><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td><td>CITY-ST-ZIP</td><td></td><td></td></tr><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td><td>CITY-ST-ZIP</td><td></td><td></td></tr><tr><td>TITLE</td><td></td><td><input type="checkbox"/> Delete</td><td>TITLE</td><td></td><td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td></tr><tr><td>NAME</td><td></td><td></td><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td><td>CITY-ST-ZIP</td><td></td><td></td></tr></tbody></table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	JONES, RAYMOND W		NAME			STREET ADDRESS	4345 S LAKE HIAWATHA DR		STREET ADDRESS			CITY-ST-ZIP	LADY LAKE, FL 32159		CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
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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:  7/23/03																																																																																																																																			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____																																																																																																																																			

CR2E034 (10/02)

352-669-4547

Attachment

TRANSMITTAL LETTER

80135156
P02000088912

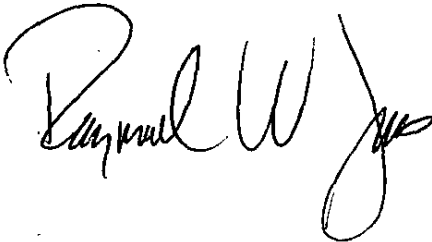
Corp. Annual Reports & Reinstatements
Division of Corporations
P O BOX 6327
Tallahassee, FL 32314

SUBJECT: R. W. JONES, INC.

Dear Sir or Madam:

Please find enclosed for filing the current year Uniform Business Report. Enclosed is a check in the amount of \$ 150.00 made payable to: Florida Department of State for the filing fee. The original form was never mailed or received. Please do not charge a late filing fee.

Yours Sincerely,



Please return to: R. W. JONES, INC.
4345 S LAKE HIAWATHA DRIVE
LADY LAKE, FL 32159