

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000122424

1. Entity Name
JONES - MOORE CONSTRUCTION, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 DEC 17 PM 4:35

Principal Place of Business
4147 TEE ROAD
BRADENTON, FL 34202

Mailing Address
4147 TEE ROAD
BRADENTON, FL 34202

2. Principal Place of Business
1412 Falls of Venice

3. Mailing Address
Circle - "same"



12152004 REIN-P CR2E098 (6/04)

City & State
Venice, Florida

City & State
"

4. FEI Number 90-0057327
APPLIED FOR
Applied For
Not Applicable

Zip 34292 Country USA

Zip Country "

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRONER, RICHARD W
4147 TEE ROAD
SARASOTA, FL 34235

7. Name and Address of New Registered Agent

Name DAMON JONES
Street Address (P.O. Box Number is Not Acceptable)
1412 Falls of Venice Circle
City Venice FL Zip Code 34292

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 *Damon Jones* DAMON JONES, PRES. 12-15-04
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 January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE D
NAME JONES, DAMON ☐ Delete
STREET ADDRESS 4147 TEE ROAD
CITY-ST-ZIP SARASOTA, FL 34235

TITLE D
NAME MOORE, EDWARD ☐ Delete
STREET ADDRESS 1412 FALLS OF VENICE CIRCLE
CITY-ST-ZIP VENICE, FL 34292

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1412 Falls of Venice Circle
CITY-ST-ZIP Venice, FL 34292

TITLE OK ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 500043484915
CITY-ST-ZIP 12/17/04--01030--004 **150.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Damon Jones* DAMON JONES, 12-15-04 941-374-0555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #