

## **2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P03000017695

Entity Name: JONES HOMES USA, INC.

**FILED**  
**Sep 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

370 CENTER POINTE CIR STE 1136  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

370 CENTER POINTE CIR STE 1136  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

FEI Number: 56-2458301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SMITH, KATHRYN  
370 CENTER POINTE CIR STE 1136  
ALTAMONTE SPRINGS, FL 32701 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: JONES, PETER E  
Address: 370 CENTER POINTE CIR STE 1136  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D  
Name: GLUCKMAN, NICK  
Address: 370 CENTERPOINTE CIR STE 1136  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: DV  
Name: CLABER, JONATHAN  
Address: 370 CENTERPOINTE CIR 1136  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: JONATHAN CLABER

D

09/18/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date