

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000001216

FILED
Apr 03, 2007
Secretary of State

Entity Name: DAVID JONES INSTALLATION COMPANY

Current Principal Place of Business:

70 SHORES BLVD.
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

423 UPPER 8TH AVE S
JACKSONVILLE BEACH, FL 32250 US

Current Mailing Address:

70 SHORES BLVD.
ST. AUGUSTINE, FL 32086

New Mailing Address:

423 UPPER 8TH AVE S
JACKSONVILLE BEACH, FL 32250

FEI Number: 51-0491640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, DAVID A
70 SHORES BLVD
SAINT AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

JONES, DAVID A
423 UPPER 8TH AVE S
JACKSONVILLE BEACH, FL 32250 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: DAVID A. JONES

04/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, DAVID
Address: 70 SHORES BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, DAVID
Address: 423 UPPER 8TH AVE S
City-St-Zip: JACKSONVILLE BEACH, FL 32250

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID A. JONES

P

04/03/2007

Electronic Signature of Signing Officer or Director

Date