

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000069425

Entity Name: MICHAEL L JONES P.A.

FILED
Mar 12, 2009
Secretary of State

Current Principal Place of Business:

8465 MERCHANTS WAY
JACKSONVILLE, FL 32222

Current Mailing Address:

8465 MERCHANTS WAY
JACKSONVILLE, FL 32222

New Principal Place of Business:

2233 PARK AVE
500
ORANGE PARK, FL 32073 US

New Mailing Address:

2233 PARK AVE
500
ORANGE PARK, FL 32073 US

FEI Number: 80-0123975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, MICHAEL L
8465 MERCHANTS WAY
JACKSONVILLE, FL 32222 US

Name and Address of New Registered Agent:

JONES, MICHAEL L
2233 PARK AVE
500
ORANGE PARK, FL 32073 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: MICHAEL L JONES P.A

03/12/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JONES, MICHAEL L
Address: 8465 MERCHANTS WAY
City-St-Zip: JACKSONVILLE, FL 32222 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JONES, MICHAEL L
Address: 2233 PARK AVE #500
City-St-Zip: ORANGE PARK, FL 32073 US

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL L JONES P.A

D

03/12/2009

Electronic Signature of Signing Officer or Director

Date