2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000070598

1. Entity Name
JONES AND JONES FABRICATION, INC.



FILED Jan 17, 2006 08:00 AM Secretary of State

Principal Place of Business

1016 SAN FERNANDO STREET FERNANDINA BEACH, FL 32034 US Mailing Address

1016 SAN FERNANDO STREET FERNANDINA BEACH, FL 32034

US



DO NOT WRITE IN THIS :	SP	ΔCF
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01122006	No Chg-P	CR2E034 (11/05)

Applied For 4. FEI Number 45-0539349 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, VERNON WAYNE 1016 SAN FERNANDO STREET FERNANDINA BEACH, FL 32034

DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the ρ ions of registered agent.	urpose of changing its registered	office or r	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title to	applicable INOTE Registered A	gent signature	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	ing 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADORESS CITY-ST-ZIP	PRES JONES, VERNON W 1016 SAN FERNANDO STREET FERNANDINA BEACH, FL 32034				
TITLE NAME STREET ADDRESS CITY-SI-ZIP	SECR JONES, REBECCA 1016 SAN FERNANDO STREET FERNANDINA BEACH, FL 32034				000000385880 01/13/06-80016-015 150.00
TITLE NAME STREET ADDRESS GITY-ST-ZIP	TREA JONES, VERNON WAYNE 1016 SAN FERNANDO STREET FERNANDINA BEACH, FL 32034			DO	NOT WRITE
TITLE NAME STREET ADDRESS GITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
IITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby indicated of the corchanged	certify that the information supplied with this fit on this report or supplemental report is true a rporation or the receiver or trustee empowere , or on an attachment with an address, with al	iling does not qualify for the exer and accurate and that my signate d to execute this report as require Il other like empowered.	mptions co are shall ha ad by Chap	ntained in Chapter 11 we the same legal effe oter 607, Florida Statut	9. Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if 1. **The content of the