2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007 8:00 am
Secretary of State
04-12-2007 90027 010 ***158.75

DOCUMENT # P04000100058

1. Entity Name
LEON JONES CONSTRUCTION, INC.

Principal Place of Business	Mailing Address
7717 NW 179TH STREET ALACHUA, FL 32615	7717 NW 179TH STREET ALACHUA, FL 32615

01152007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
16130 West HWy US 441	PO Box 2669
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Alachua, Florida	City & State: High Springs, Florida
Zip: 32616 Country: USA	Zip: 32655 Country: USA

4. FE Number: 27-0096804 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JONES, M. LEON 7717 NW 179TH STREET ALACHUA, FL 32615	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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: M. Leon Jones, President

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
P	☐ Delete		☐ Change ☐ Addition
JONES, M LEON 7717 NW 179TH STREET ALACHUA, FL 32615			
S	☒ Delete		☐ Change ☐ Addition
RIDGELL, LEA 7717 NW 179TH STREET ALACHUA, FL 32615			
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: M. Leon Jones, President
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR