

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000154844

Entity Name: THE JONES GROUP II, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

554 RYANS WOOD LANE
PALM HARBOR, FL 34683

New Principal Place of Business:

578 RYANS WOOD LANE
PALM HARBOR, FL 34683

Current Mailing Address:

554 RYANS WOOD LANE
PALM HARBOR, FL 34683

New Mailing Address:

578 RYANS WOOD LANE
PALM HARBOR, FL 34683

FEI Number: 20-2181212

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, JUSTIN
554 RYANS WOOD LANE
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

JONES, JUSTIN
578 RYANS WOOD LANE
PALM HARBOR, FL 34683 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:

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, JUSTIN
Address: 554 RYANS WOOD LANE
City-St-Zip: PALM HARBOR, FL 34683

Title: V () Delete
Name: JONES, DENNIS
Address: 554 RYANS WOOD LANE
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JONES, JUSTIN
Address: 578 RYANS WOOD LANE
City-St-Zip: PALM HARBOR, FL 34683

Title: V (X) Change () Addition
Name: JONES, DENNIS
Address: 578 RYANS WOOD LANE
City-St-Zip: PALM HARBOR, FL 34683

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: JUSTIN JONES

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date