

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129362

Entity Name: CALVIN JONES INC.

FILED  
Jan 05, 2012  
Secretary of State

**Current Principal Place of Business:**

130 BROOKSIDE ST  
LEHIGH ACRES, FL 33936

**New Principal Place of Business:**

**Current Mailing Address:**

130 BROOKSIDE ST  
LEHIGH ACRES, FL 33936

**New Mailing Address:**

FEI Number: 05-0629218

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JONES, CALVIN  
130 BROOKSIDE ST  
LEHIGH ACRES, FL 33936 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: S/D  
Name: BRANCH, MARY  
Address: 130 BROOKSIDE ST  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: PD  
Name: JONES, CALVIN C  
Address: 130 BROOKSIDE ST  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: VP  
Name: BRANCH, CARSON L  
Address: 130 BROOKSIDE ST  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: SS/D  
Name: REYNOLDS, RICHARD C  
Address: 4712 5TH ST WEST  
City-St-Zip: LEHIGH ACRES, FL 33971

I hereby 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 all other like empowered.

SIGNATURE: MARY BRANCH

SEC

01/05/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date