

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 19, 2008 8:00 am**  
**Secretary of State**

08-19-2008 90004 030 \*\*\*150.00

DOCUMENT # P06000108080

1. Entity Name  
THE JONES LAW FIRM, P.A.



Principal Place of Business  
550 WATER STREET, SUITE 1140  
JACKSONVILLE, FL 32202

Mailing Address  
550 WATER STREET, SUITE 1140  
JACKSONVILLE, FL 32202

2. Principal Place of Business - No P.O. Box #

6900 Southpoint Blvd  
Suite, Apt. #, etc.  
Ste 210

3. Mailing Address

P.O. Box 441495  
Suite, Apt. #, etc.



07212008 Chg-P CR2E034 (12/06)

City & State  
Jacksonville, FL  
Zip  
32216  
Country  
USA

City & State  
Jacksonville, FL  
Zip  
32202  
Country  
USA

4. FEI Number  
20-4355188  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TENEBRUSO-BALL, FRANCESCA  
FTB BUSINESS SOLUTIONS  
3717 BOWDEN CIR E  
JACKSONVILLE, FL 32202

7. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

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

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
J. ERIC JONES, P.A.  
STREET ADDRESS  
CITY-ST-ZIP  
550 WATER STREET, SUITE 1140  
JACKSONVILLE, FL 32202

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Pres/Director  
J. Eric Jones  
6900 Southpoint Blvd, Ste 210  
Jacksonville, FL 32216

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*[Signature]* Aug 15, 2008