

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P14099

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: JONES TRACTOR AND EQUIPMENT COMPANY, INC.

Current Principal Place of Business:

U.S. 19 SOUTH
THOMASVILLE, GA 31792

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7690
THOMASVILLE, GA 31758

New Mailing Address:

FEI Number: 58-1198697 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, E. EARL
7348 GRENVILLE RD.
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

JONES, E. EARL
7027 GRENVILLE RD.
TALLAHASSEE, FL 32309 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: _____

Electronic Signature of Registered Agent

04/30/2002

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: JONES, THOMAS S., JR.,
Address: 1792 GATLIN CREEK RD.
City-St-Zip: THOMASVILLE, GA 31792

Title: P () Delete
Name: JONES, KIM B
Address: 10050 U.S. 19 SOUTH
City-St-Zip: THOMASVILLE, GA 31792

Title: V () Delete
Name: JONES, E. EARL,
Address: 7348 GRENVILLE RD.
City-St-Zip: TALLAHASSEE, FL 32308

Title: ST (X) Delete
Name: JONES, FRANCES S.,
Address: 2303 GATLIN CREEK RD.
City-St-Zip: THOMASVILLE, GA 31792

Title: C (X) Delete
Name: JONES, THOMAS S SR.
Address: 2303 GATLIN GREEK RD.
City-St-Zip: THOMASVILLE, GA 31792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VS (X) Change () Addition
Name: JONES, THOMAS S JR
Address: 1792 GATLIN CREEK RD.
City-St-Zip: THOMASVILLE, GA 31757

Title: PC (X) Change () Addition
Name: JONES, KIM B
Address: 10050 U.S. 19 SOUTH
City-St-Zip: THOMASVILLE, GA 31757

Title: VT (X) Change () Addition
Name: JONES, EDWIN E
Address: 7027 GRENVILLE RD.
City-St-Zip: TALLAHASSEE, FL 32309

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS S JONES JR

Electronic Signature of Signing Officer or Director

VS

04/30/2002

Date