2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #**

1. Entity Name

P93000066449

FRANK JONES PAINTERS, INC.



FILED Jan 21, 2003 8:00 am Secretary of State 01-21-2003 90038 004 ***150.00

						OF WE 1					
Principal Pla	ce of Busines:	S	Mailing	Address			7				
3698 GLENWOOD OAKS LANE			3698 (3698 GLENWOOD OAKS LANE					900	05547	
YULEE FL 32097				YULEE FL 32097					300	00031	
US			US					1 (B11)(B1) (10 (B100 (III)) 60((I B11)) B11)		1811 DIDIN 1811 (84)	
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2. Principal	Place of Busin	ess	3. Maili	3. Mailing Address			7	1 1 1 1 1 1 1 1 1 1 		0 1 0 0 0 0 0 0 0 0	
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Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
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City & State			City &	City & State			4. FE	I Number		Applied For	
7:								59-3203513		Not Applicable	
Zip Country			Zip Cou		Country	intry 5.		ertificate of Status Desired	□ \$8. 75 .	Additional	
							_		Fee Requ	rired	
	6. Name	and Address of Current	t Registered	d Agent			7. Na	ime and Address of New Regis	stered Agent		
				_		Name					
ROWE AND ROWE, P.A.				Street Address (P			(PO Box	P.O. Box Number is Not Acceptable)			
9471 BAY	YMEADOWS	RD		Stradition			(1.0. Box Number is Not Acceptable)				
SUITE 203							-		******		
		2050			_						
JACKSONVILLE FL 32256						City			FL Zip C	ode	
8. The above	e named entity	submits this statement for	or the purpo	se of changing its	reaistered	office or registe	red agen	nt, or both, in the State of Florida	. Lam familiar wi	th, and accept	
the obliga	itions of registe	ered agent.			3	omeo or regions	again	in a sound in the state of thorough		in, and docopt	
										ŕ	
SIGNATURE		or printed name of registered agent	t and title if englis	cable (NOTS	E: Docietored A	gent signature require	dubas reisa	ntation)	DATE		
			t and the ir applic	, and 12	E. Hegistered A	gent signature reduite	G when reins	saung)	DATE		
		FEE IS \$150.00					ĺ	9. Election Campaign Financ	ina de	. 00	
	• .	3 Fee will be \$550.00						Trust Fund Contribution.		.00 May Be ded to Fees	
Make Checi	k Payable to	Florida Department o	of State						.— /101	100 10 7 000	
10. 🧷	···	OFFICERS AND	DIRECTOR	S	11.		ADD	ITIONS/CHANGES TO OFFICER	S AND DIRECTO	DRS IN 11 .	
TITLE "	VP			☐ Delete	TITLE				Chang	e	
NAME	JONES, BI	ENJAMIN F JR			NAME					i	
STREET ADDRESS		WOOD OAKS LN			STREET A	ADDRESS					
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NAME	JONES, M	ONTY S			NAME					_	
STREET ADDRESS		WOOD OAKS LN			STREET A	ADDRESS					
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NAME	JONES, FI	MANK C			NAME		- 23	الراجات المحداث	والمالات <u>بي</u> ما د ماليوسياسات		
STREET ADDRESS		WOOD OAKS LN			STREET A	ADDRESS					
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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: _<

