FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

Corporation Name

P95000024699 (7)

C. JONES & COMPANY, INC.

Principal Place of Business

180 S.E. 4TH COURT POMPANO BEACH FL 33060 Mailing Address

180 S.E. ATHLEOURT POMPANO BEACH FL 3308 FILED

97 JAN 16 AM 8: 30

SECRETARY OF STATE ALL AHASSEE FLORIDA



POMPANG BEACH FL 33060			POMPANO BEACH FE 33060		3. Date incorporated of Qualified Sal. Date of Last Report	
·					03/28/1995	
2. Principal Plac	ce of Busines	S	2a. Mailing Address		4 FEI Number	
21 6977 6	E. Ches	tunt Hill St.	26 6977 E. Che	estrut Hill	St. 65-0567//0 Not Applicable	
Suite, Apt. #,	, etc.		Sulle, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State 23 High	ands R	Ranch, Co.	City & State 28 Highlands	Ranch, C	6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip 8017	26 2	Country	29 80126	Country 30	This corporation has liability for intangible tax under s 199.032, Florida Statutes	
g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
81 Name Company R Constant						
JONES. C A				82 Street Address (P.O. Box Number is Not acceptable)		
180 S.E	TH COL	jrt			1210 S.E. 5 14 St.	
POMPANO BEACH FL 33060				83		
84 City 7 - 2 - 1 D - 1 - 85 Zip Code						
	0				Deented Beach FL 33441	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office						
or registered agent, or both in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. I am						
SIGNATURE		The 1		(seorge	2 B. Grosheim 1/15/97	
	lyratics shed or	prints frame of register Labor Car OFFICERS AND	/	: Registered Agent signature i		
12. Title	PD	OFFICE BS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAME	JONES	. C A		1.2 NAME	اسم از را د	
STREET ACIDRESS		4TH COURT		1.3 STREET ADDRESS	6977 En Chestnut Hill St.	
City-St-ZiP		NO BEACH FL 33060		1.4 CITY - ST - ZIP	Highlands Rand Co. 80126	
TITLE	STD		☐ DELETE	2. 1 TITLE	Change Addition	
NAME		, Suzanne M		2.2 NAME	(A)	
STREET ADDRESS		E. WILL COURT		2.3 STREET ADDRESS	6977 E. Chestunt Hill St.	
CITY-ST-ZIF	POMP	and beach fl 33060		2 4 CITY - ST - ZIP	Highlands Ranch, Co. 80126	
TITLE		•	DELETE.	3. 1 TITUE	Change Addition	
NAME				3 2 NAME	9000020644390	
STREET ADDRESS				3 3. STREET ADDRESS	-01/22/9701089087 ****548.75 ****548.75	
CITY-S1-ZIF	***************************************		TT DELETE	3.4 CITY - ST - ZIP	・ 本来をおうせつ。「つ キャデカンサン。」つ Change Addition	
TITLE			□ bertie	4. 1 TITLE	Cuange Monton	
NAME CARGOT ARROWAGE				4.2 NAME 4.3 STREET ADDRESS		
SIREET ADDRESS				4.4 CITY-ST-ZiP		
CITY-S1-ZIP TITEE			DELETE	5. 1 TITLE	Change Addition	
NAME			<u></u>	5.2 NAME		
STREET ADDRESS				5.3 STREET ADDRESS		
D/TY-ST-ZIP				5.4 City-St-ZiP		
TITL!			DELETE	6. 1 TITLE	Change Addition	
NAME]				6.2 NAME		
STREET ADDRESS				6 3 STREET ADDRESS		
CHTM ST-ZIP				6.4 C(1 Y - ST - ZIP		
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.						

SIGNATURE

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

303-470-878

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