2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2009
Secretary of State

DOCUMENT# P96000028769

Entity Name: G. JONES, INC.

Current Principal Place of Business:

900 STINSON WAY
STE 7
WEST PALM BEACH, FL 33411 US

New Principal Place of Business:

5625 COLBRIGHT ROAD
LAKE WORTH, FL 33467 US

Current Mailing Address:

900 STINSON WAY
STE 7
WEST PALM BEACH, FL 33411 US

New Mailing Address:

5625 COLBRIGHT ROAD
LAKE WORTH, FL 33467 US

FEI Number: 65-0655424 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MULLIN, JAMES G
2080 NORTHWEST BOCA RATON BLVD #6
BOCA RATON, FL 33431 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: JONES, GEORGE
Address: 900 STINSON WAY STE 7
City-St-Zip: WEST PALM BEACH, FL 33411

Title: V ( ) Delete
Name: JONES, LISA
Address: 900 STINSON WAY STE 7
City-St-Zip: WEST PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: JONES, GEORGE
Address: 5625 COLBRIGHT ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: V (X) Change ( ) Addition
Name: JONES, LISA
Address: 5625 COLBRIGHT ROAD
City-St-Zip: LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LISA M. JONES VP 05/05/2009

Electronic Signature of Signing Officer or Director Date