

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000031242

Entity Name: BARRY L. JONES, L.C.S.W., P.A.

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

1621-D METROPOLITAN BLVD, #D  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

1621-D METROPOLITAN BLVD,  
TALLAHASSEE, FL 32308

## Current Mailing Address:

1621-D METROPOLITAN BLVD, #D  
TALLAHASSEE, FL 32308

## New Mailing Address:

FEI Number: 59-3376231      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JONES, BARRY L LCSW  
1621-D METROPOLITAN BLVD, #D  
TALLAHASSEE, FL 32308      US

## Name and Address of New Registered Agent:

JONES, BARRY L LCSW  
1621-D METROPOLITAN BLVD,  
TALLAHASSEE, FL 32308      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: BARRY L. JONES, LCSW

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: JONES, BARRY L  
Address: 1621-D METROPOLITAN BLVD, #D  
City-St-Zip: TALLAHASSEE, FL 32308

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: JONES, BARRY L  
Address: 1621-D METROPOLITAN BLVD,  
City-St-Zip: TALLAHASSEE, FL 32308

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: BARRY L. JONES, LCSW

PRES

04/28/2009

Electronic Signature of Signing Officer or Director

Date