FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000018749

1. Corporation Name

NEW, JONES & ASSOCIATES, INC.

Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90088 008 ***150.00



Principal Place	e of Business	Mailing Address			
7319 COOK LANE P O BOX 501					
WINTER PARK I	FL 32792	GOLDENROD FL 32733			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					02/26/1998
2 Deigning D	lace of Pusiness	2a. Mailing Address			4 FEI Number Applied For
					59-3495092 Not Applicable
21 2362 Sterra 20 26 Suite, Apt. #, etc.					\$8.75 Additional
					5. Certifcate of Status DesiredFee Required
City & State City & State					6. Election Campaign Financing S5.00 May Be
					Trust Fund Contribution Added to Fees
23 Martand 28 Zip Country Zip			Count	гу	8. This corporation owes the current year Intangible
24 327	51 ISSEMINOLE		5]	•	Personal Property Tax. Yes Yo
24 0	9. Name and Address of Current		1		10. Name and Address of New Registered Agent
	J. Hallo and Alamond C. Salver		8	1 Name	<u> </u>
NEW, JAMES H					
7319 COOK LANE			8	2 Street	t Address (P.O. Box Number is Not Acceptable)
WINTER PARK FL 32792				3 -	362 SIEVIN 2911 -
)				~	
			8	4 City	Mai Hand - FL 85 Zip Code 32751
				<u> </u>	
.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 obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND		13.	jont orginatars	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1,1 TITLE		Change Addition
NAME	NEW, JAMES H	_	1.2 NAM	F	NEW, JAMES H 2362 SIEVVan Land
)	7319 COOK LANE			- EET ADDRESS	2362 Siervan Land
STREET ADDRESS	WINTER PARK FL 32792		1.4 CITY		Maitland, FL3275
CITY-ST-ZIP			2.1 TITLE		To Change ☐ Addition
TTTLE	D CAROLYN A	ب محدد اد			NEW, CAROLYNA 2362 Slevra Land Mait land, FZ 32751
NAME	NEW, CAROLYN A		2.2 NAM		2262 Slaves Land
STREET ADDRESS	7319 COOK LANE			ET ADDRESS	1 1 1 0 - 17 37751
CITY-ST-ZIP	WINTER PARK FL 32792		2.4 CiTY		Change Addition
TITLE		☐ DELETE	3.1 TITLE		Citatige [] Addition
NAME			3.2 NAM		·
STREET ADDRESS		•	3.3 STRE	ET ADDRESS	S
CITY-ST-ZIP	·		3.4. CTTY	-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	•	☐ Change ☐ Addition
NAME			4. 2 NAM	Ε.	
STREET ADDRESS			4.3 STRE	ET ADDRESS	s
CITY-ST-ZIP			4.4 CITY	-ST-ZIP	
TITLE	**-	☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAM		
STREET ADDRESS			1	ET ADDRESS	s
\ · ·	~			-ST-ZiP	and the second of the second o
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
TITLE			6.2 NAM		
NAME	Responsible to the				
STREET ADDRESS	g		■ 6.3 STRE	ET ADDRESS	5 I

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: