2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # \$80665

1. Entity Name
KEN JONES REALTY CO.



FILED Apr 16, 2008 08:00 A Secretary of State

Principal Place of Business

13213 TIFTON DR. TAMPA, FL 33618 Mailing Address

P.O. BOX 271102 TAMPA, FL 33688-1102 US



DO NOT WRITE IN THIS SPACE

03082008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3082563

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, KENNETH A 13213 TIFTON DRIVE TAMPA, FL 33618

DO NOT WRITE IN THIS SPACE

8. 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. Fam familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if approache. (MOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Final Trust Fund Contribution.		\$5.00 May Be Added to Fees	U00000901443
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DP KENNETH, JONES A 13213 TIFTON DR TAMPA, FL	CIORS			04/29/08-80068-020 150.00
NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE
TITLE NAME STREET ADDRESS CHY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					- · · - · · ·
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information					

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of 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 wher like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED

Kenneth A. Jone

418108

813-909-0909

Daytime Phone #