2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000070542

Entity Name: A. JONES & ASSOCIATES, INC

FILED Jan 21, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2815 NW 13TH STREET

SUITE 302

GAINESVILLE, FL 32609 US

Current Mailing Address: New Mailing Address:

2815 NW 13TH STREET

SUITE 302

GAINESVILLE, FL 32609 US

FEI Number: 20-1129957 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JONES, ANITA B
2815 NW 13TH STREET
SUITE 302
GAINESVILLE, FL 32609 US

NALBANDIAN, ROPEN
2815 NW 13TH STREET
SUITE 423
GAINESVILLE, FL 32609 US

GAINESVILLE, FL 32609 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: ROPEN NALBANDIAN 01/21/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PV () Delete Title: P (X) Change () Addition Name: JONES, ANITA B Name: JONES, ANITA B

Address: 2815 NW 13TH STREET Address: 2815 NW 13TH STREET
City-St-Zip: GAINESVILLE, FL 32609 US City-St-Zip: GAINESVILLE, FL 32609 US

Name: Name: NALBANDIAN, ROPEN

Address: Address: 2815 NW 13TH STREET SUITE 423

City-St-Zip: City-St-Zip: GAINESVILLE, FL 32609

Title: () Delete Title: ST () Change (X) Addition

Name: Name: BUICKEL, LINDA

Address: Address: 2815 NW 13TH STREET SUITE 423

City-St-Zip: City-St-Zip: GAINESVILLE, FL 32609

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LINDA BUICKEL ST 01/21/2005