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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 848992

(

STANLEY JONES, CORPORATION

FILED Apr 23 1998 8:00am Secretary of State



						19 4 5 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Principal Place of Business	Mailing Address						
119 MORRIS STREET P.O. BOX 5260							
80UTH FULTON TN 38257 SOUTH FULTON TN 3825		!57		DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE		
00					3. Date Incorporated or Qualified		
				04/30/1981			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		pplied For	
21	26			62-0722294		ot Applicable	
Sulte, Apt. #, etc. Suite, Apt. #, e		. etc.			\$8.75 Additional		
22 27				5. Certificate of Status Desired		equired	
City & State	/ & State City & State			6. Election Campaign Financing	\$5.00	May Be	
23	28			Trust Fund Contribution		to Fees	
Zip Country	Zip	Country	/	8. This corporation owes or has paid the co			
24 25	29	30				_ No	
Name and Address of Current	Registered Agent			10, Name and Address of New Registered	l Agent		
CT CORPORATION SYSTEM		81	Name				
1200 \$. PINE ISLAND ROAD			82 Street Address (P.O. Box Number is Not Acceptable)				
PLANTATION FL 33324							
		83					
		84	City	pro g	85 Zip	Code	
44 8			L	FI			
 Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with, and accept the obligate 	ano 607.1508, Florida Stati f Florida: Such change was	ites, the abov authorized b	e≀named y the cor	d corporation submits this statement for the purpose in operation's board of directors. I hereby accept the ap	of changing i pointment as	ts registered registered	
agent. I am familiar with, and accept the obligati	ions of, Section 607.0505, F	Iorida Statute	S.		•	-	
SIGNATURE		16 D		e required when reinstating) DATE			
Signature, typind or printed name of registerest agent 12. OFFICERS AND		13.	ent signar.ir	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	RS IN 12	
TITLE PD	DELETE	1.1 TITLE		D	X Change	Addition	
NAME JONES, JOHN C.	_	1.2 NAME		JOHN C. JONES	_ ,	_	
STREET ADDRESS 7079 JONES LANE			ADDRESS	7079 JONES LANE			
CITY-ST-ZIP SOUTH FULTON TN		1.4 CITY-		SOUTH FULTON TN 38257			
TITLE STV	DELETE	2.1 TITLE		PD	Change	Addition	
NAME JONES, STANLEY II G.		2.2 NAME		STANLEY G. JONES II			
STREET ADDRESS RT 2 BOX 323		2.3 STREE	ADDRESS	РТ 2 BOX 323			
CITY-ST-ZIP SOUTH FULTON TN		2. 4 CITY-	ST-ZiP	SOUTH FULTON TN 38257			
TIFLE V	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition	
NAME FRAZIER, GEORGE		3.2 NAME		ļ			
STREET ADDRESS WELLS AVENUE		3 3 STREET	ADDRESS				
CITY-ST-ZIP FULTON KY		3.4. CITY-	ST-ZIP				
TITLE	DELETE	4.1 TITLE			☐ Change	☐ Addition	
NAME NEWTON, JAMES		4. 2 NAME					
STREET ADDRESS 1210 BROOKWOOD CIRCLE		4.3 STREET	ADDRESS				
CITY-ST-ZIP FULTON KY		4.4 CITY - 5	T- <i>Z</i> IP		· -		
TITLE V PADOLAY TED	☐ DELETE	5.1 TITLE			☐ Change	Addition	
NAME BARCLAY, TED		5.2 NAME					
STREET ADDRESS ROUTE 5, BOX 345		5.3 STREET	ADDRESS				
CITY-ST-ZIP SOUTH FULTON TN TITLE CAST	DELETE	5.4 CITY - S	T-ZIP		F7.6:	- 1 A 1 1 1 1 1	
MINARD MICHAEL C	DELETE	6.1 TITLE		ST	X Change	Addition	
440 MODDIC CTDEET		6.2 NAME		MICHAEL G. MILNER			
SOUTH FULTON TN		6.3 STREET		119 MORRIS STREET			
14. I hereby certify that the information supplied with	this films slove set suggitter	6.4 City - S	T-2IP	SOUTH FULTON TN 38257	mesify shows store	information	
indicated on this annual report or supplemental :	sunual report is true and ac	curate and th	at my sid	poature shall have the same legal effect as if made u	nder oath: th:	atlam an I	
officer or director of the corporation of 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 charging, or of an attribute an address.							