

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2004 8:00 am
Secretary of State

06-09-2004 90004 006 ***550.00

DOCUMENT # P98000001510

1. Entity Name

AIM AND ASSOCIATES OF JACKSONVILLE, INC.



Principal Place of Business

475 W TOWN PLACE
SUITE 114
SAINT AUGUSTINE, FL 32092

Mailing Address

475 W TOWN PLACE
SUITE 114
SAINT AUGUSTINE, FL 32092

44046430



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

06012004

Chg-P

CR2E034 (10/03)

4. FEI Number

59-3487519

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WISE, JACK F II
1773 SHOAL CREEK CIRCLE
GREEN COVE SPRINGS, FL 32043

7. Name and Address of New Registered Agent

Name **STEPHEN J. DUVAL, CPA**

Street Address (P.O. Box Number is Not Acceptable)
428 WALNUT STREET

City **GREEN COVE SPRINGS FL** Zip Code **32043**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

6/1/04

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
WISE, JACK F II
1773 SHAOL CREEK CIR
GREEN COVE SPRINGS, FL 32043 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
RINEHART, JERRY H
1757 FIDDLERS RIDGE DR
ORANGE PARK, FL 32073 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
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☐ Change ☐ Addition

12. 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 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 or 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 other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment

44046490
P98000001510



DuVal & Company

CERTIFIED PUBLIC ACCOUNTANTS
A PROFESSIONAL ASSOCIATION

June 1, 2004

Florida Department of State
Division of Corporations
P. O. Box 1500
Tallahassee, Florida 32302-1500

Re: Aim & Associates of Jacksonville, Inc.
Document P98000001510


Gentlemen:

Enclosed is the 2004 Annual Report for the captioned corporation along with payment in the amount of \$550, including the \$400 late filing fee.

As of the due date of this report, circumstances dictated that the corporation was going to be dissolved and no longer operate as a Florida for profit corporation. Since that time, it has been determined that the corporation will continue, and the report is being filed forthwith.

In view of these extenuating circumstances and the unsettled nature of the corporation at filing deadline, we respectfully request a refund of the late filing fee. All annual reports have been filed in prior years on a timely basis and will be so filed in the future.

Sincerely,


Stephen J. DuVal, CPA

skr

Enclosures