

05-04-2005 90231 001 *T,200.00
G77745

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

05 MAY 25 AM 8:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G77745

1. Entity Name
ST. JOHNS INVESTMENT MANAGEMENT COMPANY



Principal Place of Business
1301 RIVERPLACE BLVD
SUITE 2530
JACKSONVILLE, FL 32207-9026 US

Mailing Address
P.O. BOX 10566, ACCT DIV
MAIL CODE: AL/BVCH/ALT
BIRMINGHAM, AL 35296

66015296



01272005 No Chg-P CR2E034 (10/03)

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4. FEI Number
59-2358951

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	HEGEL, GARRET R
STREET ADDRESS	15 SOUTH 20TH ST-COMPASS BANK 19TH FL
CITY-STATE-ZIP	BIRMINGHAM, AL 35233
TITLE	D
NAME	HELMS, WILLIAM C
STREET ADDRESS	2001 KIRBY-COMPASS BANK AMG
CITY-STATE-ZIP	HOUSTON, TX 77019
TITLE	VP
NAME	PRICE, DAVID T
STREET ADDRESS	2274 PLATWOOD CT
CITY-STATE-ZIP	JACKSONVILLE, FL 32223
TITLE	CEO
NAME	ALBANEZE, DAVID T
STREET ADDRESS	7800 JAMES ISLAND TRAIL
CITY-STATE-ZIP	JACKSONVILLE, FL 32256
TITLE	VP
NAME	RAYNE, DAN Treasurer
STREET ADDRESS	140 GOTTAL CR Pressley, Kirk
CITY-STATE-ZIP	JACKSONVILLE, FL 32259 15 South 20th Street
	Birmingham, AL 35233
TITLE	P
NAME	ALLEN, JOHN L
STREET ADDRESS	4399 PHELPS PLACE
CITY-STATE-ZIP	JACKSONVILLE, FL 32207

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JB 5/25

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: *Kirk Pressley* Kirk Pressley 4/27/05 (205) 297-5724
Signature and typed or printed name of signing officer or director Date Daytime Phone #