

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# G77745

FILED
Oct 22, 2007
Secretary of State**Entity Name:** ST. JOHNS INVESTMENT MANAGEMENT COMPANY**Current Principal Place of Business:**1301 RIVERPLACE BLVD
SUITE 2530
JACKSONVILLE, FL 322079026 US**New Principal Place of Business:**10060 SKINNER LAKE DR
SUITE 501
JACKSONVILLE, FL 32246 US**Current Mailing Address:**P.O. BOX 10566
MAILCODE: AL BI CH ACT
BIRMINGHAM, AL 35296**New Mailing Address:****FEI Number:** 59-2358951 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** D () Delete
Name: HEGEL, GARRET R
Address: 15 SOUTH 20TH ST
City-St-Zip: BIRMINGHAM, AL 35233**Title:** S () Delete
Name: CARTEE, JOSEPH
Address: 15 SOUTH 20TH ST
City-St-Zip: BIRMINGHAM, AL 35233**Title:** T () Delete
Name: PRESLEY, KIRK
Address: 15 SOUTH 20TH ST
City-St-Zip: BIRMINGHAM, AL 35233**Title:** P () Delete
Name: ALLEN, JOHN L
Address: 4399 PHELLPS PLACE
City-St-Zip: JACKSONVILLE, FL 32207**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** CEO (X) Change () Addition
Name: ALBANEZE, DAVID
Address: 10060 SKINNER LAKE DR
City-St-Zip: JACKSONVILLE, FL 32246**Title:** SVP () Change (X) Addition
Name: PRICE, DAVID
Address: 10060 SKINNER LAKE DR
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: KIRK PRESSLEY

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10/22/2007

Electronic Signature of Signing Officer or Director

Date