

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K08088

FILED
Mar 09, 2009
Secretary of State

Entity Name: JIM FISHER & COMPANY

Current Principal Place of Business:

424 LUNA BELLA LANE
SUITE 133
NEW SMYRNA BEACH, FL 32168 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 290445
PORT ORANGE, FL 32129

New Mailing Address:

P.O. BOX 2129
COOKEVILLE, TN 38502

FEI Number: 59-2870720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRODE, KIM
4720 HIDDEN LAKE DR
PORT ORANGE, FL 32129 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FISHER, JAMES R.,
Address: P.O. BOX 290445
City-St-Zip: PORT ORANGE, FL 32129 US

Title: ST () Delete
Name: FISHER, JOYCE K.,
Address: P.O. BOX 290445
City-St-Zip: PORT ORANGE, FL 32129 US

Title: VPD (X) Delete
Name: FISHER, WILLIAM E.,
Address: P.O. BOX 4393
City-St-Zip: KAILUA-KONA, HI 96745

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FISHER, JAMES R.,
Address: P.O. BOX 2129
City-St-Zip: COOKEVILLE, TN 38502 US

Title: ST (X) Change () Addition
Name: FISHER, JOYCE K.,
Address: P.O. BOX 2129
City-St-Zip: COOKEVILLE, TN 38502 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES R. FISHER

PRES

03/09/2009

Electronic Signature of Signing Officer or Director

Date