2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2011
Secretary of State

DOCUMENT# N02000000501

Entity Name: VIM JAX, INC.

Current Principal Place of Business:

41 E. DUVAL ST.
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

41 E. DUVAL ST.
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 75-3002172 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURT, JAMES N P
3540 SUNNYSIDE DR.
JACKSONVILLE, FL 32202 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: P
Name: BURT, JAMES
Address: 3540 SUNNYSIDE DR
City-St-Zip: JACKSONVILLE, FL 32207

Title: D
Name: RIDGE, GEORGE E
Address: 136 E BAY ST STE 301
City-St-Zip: JACKSONVILLE, FL 32202

Title: V
Name: MCKINTOSH, C.B.
Address: 4063 RIBAULT RIVER LN
City-St-Zip: JACKSONVILLE, FL 32208

Title: D
Name: PETRY, DICK
Address: 6921 MULLIN ST
City-St-Zip: JACKSONVILLE, FL 32210

Title: C
Name: ALONSO, LEO
Address: 831 CHICOPIT LANE
City-St-Zip: JACKSONVILLE, FL 32225

Title: V
Name: LORIZ, LI
Address: 4567 ST JOHNS BLUFF RD S
City-St-Zip: JACKSONVILLE, FL 322242672

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFF MATTHEWS ED 02/24/2011
Electronic Signature of Signing Officer or Director Date