2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2004
Secretary of State

DOCUMENT# P00000044710

Entity Name: WIMBERLY & ASSOCIATES, INC.

Current Principal Place of Business:

PO BOX 5829
JACKSONVILLE, FL 32247

New Principal Place of Business:

P.O. BOX 5829
JACKSONVILLE, FL 32247

Current Mailing Address:

PO BOX 5829
JACKSONVILLE, FL 32247

New Mailing Address:

P.O. BOX 5829
JACKSONVILLE, FL 32247

FEI Number: 59-3628142 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WIMBERLY, SAM B JR.
7246 PLACID OAKS DR
JACKSONVILLE, FL 32277

Name and Address of New Registered Agent:

WIMBERLY, JOHN S
507 BARCLAY AVENUE
ALTAMONTE SPRINGS, FL 32701

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: JOHN S. WIMBERLY 09/02/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: WIMBERLY, SAM B JR.
Address: 7246 PLACID OAKS DR
City-St-Zip: JACKSONVILLE, FL 32207

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: WIMBERLY, JOHN S
Address: 507 BARCLAY AVENUE
City-St-Zip: ALTAMONTE SPRINGS, FL 32207

Title: ST ( ) Change (X) Addition
Name: WIMBERLY, CHARLES B
Address: 4359 JIGGERMAST AVENUE
City-St-Zip: JACKSONVILLE, FL 32277

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOHN S. WIMBERLY P 09/02/2004
Electronic Signature of Signing Officer or Director Date