## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000125529

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

ORLANDO, FL 32833

WEST, ROGER

2226 BAKER AVE

ORLANDO, FL 32833

(X) Delete

VD

FILED Jun 16, 2007 Secretary of State

Entity Name: AIM DEBT-FREE, CORP. **Current Principal Place of Business: New Principal Place of Business:** 2226 BAKER AVENUE ORLANDO, FL 32833 **Current Mailing Address: New Mailing Address:** 2226 BAKER AVENUE ORLANDO, FL 32833 FEI Number: 20-3480199 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GRAYSON-STANLEY, WANDA 2226 BAKER AVENUE ORLANDO, FL 32833 US 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 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DCFO () Delete Title: DCFO (X) Change ( ) Addition GRAYSON, KEITH Name: Name: GRAYSON-STANLEY, WANDA J 2226 BAKER AVENUE 2226 BAKER AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32833 City-St-Zip: ORLANDO, FL 32833 Title: Title: SVP () Delete (X) Change ( ) Addition Name: JOANNE, HOLLINS Name: KEITH, GRAYSON 2226 BAKER AVE 2226 BAKER AVE Address: Address: ORLANDO, FL 32833 ORLANDO, FL 32833 City-St-Zip: City-St-Zip: Title: SVD ( ) Delete Title: AVP (X) Change ( ) Addition GRAYSON-STANLEY, WANDA CLEVELAND, JOANNE Name: Name: 2226 BAKER AVENUE 2226 BAKER AVENUE Address: Address:

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

ORLANDO, FL 32833

() Change () Addition

SIGNATURE: WANDA J GRAYSON-STANLEY **DCEO** 06/16/2007