

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY 31 AM 8:38

DOCUMENT # P94000088651 (2)

1. Corporation Name

JIMMY & ASSOCIATES, INC.

Principal Place of Business

1110 E GADSDEN ST
PENSACOLA FL 32501

Mailing Address

1110 E GADSDEN ST
PENSACOLA FL 32501

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

12/07/1994

3a. Date of Last Report

2. Principal Place of Business

21 1010 N. 12 AVE.

2a. Mailing Address

26 SAME

4. FEI Number

89-3045763

Applied For

Not Applicable

22 Suite, Apt. #, etc.

133

27 Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

23 City & State

PENSACOLA FL

28 City & State

28

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

24 Zip

32503

25 Country

US

29 Zip

30

Country

30

8. This corporation has liability for intangible tax under S. 199.032,

Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AMERSON, JAMES E
1110 E GADSDEN ST
PENSACOLA FL 32501

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

James E. Amerson

(NOTE: Registered Agent signature required when reappointing)

DATE

1-17-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PSTD
NAME AMERSON, JAMES E
STREET ADDRESS 1110 E GADSDEN ST
CITY ST ZIP PENSACOLA FL 32501

1 1 TITLE
1 2 NAME
1 3 STREET ADDRESS
1 4 CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

2 1 TITLE
2 2 NAME
2 3 STREET ADDRESS
2 4 CITY ST ZIP

☐ Change ☐ Addition

TITLE
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CITY ST ZIP

3 1 TITLE
3 2 NAME
3 3 STREET ADDRESS
3 4 CITY ST ZIP

☐ Change ☐ Addition

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4 1 TITLE
4 2 NAME
4 3 STREET ADDRESS
4 4 CITY ST ZIP

☐ Change ☐ Addition

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5 1 TITLE
5 2 NAME
5 3 STREET ADDRESS
5 4 CITY ST ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

6 1 TITLE
6 2 NAME
6 3 STREET ADDRESS
6 4 CITY ST ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

James E. Amerson

(NOTE: Signature and typed name of signing officer on director)

1-17-95 43463493