

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000062511

Entity Name: JIM FURR & ASSOCIATES, INC.

FILED
Jan 21, 2009
Secretary of State

Current Principal Place of Business:

3285 NIGHTTHAWK LANE
PENSACOLA, FL 32506

New Principal Place of Business:

17 S PALAFOX PL
STE 386
PENSACOLA, FL 32502

Current Mailing Address:

BASS AND SANDFORT ACCOUNTANTS
1301 WEST GARDEN STREET
PENSACOLA, FL 32501

New Mailing Address:

17 S PALAFOX PL
STE 386
PENSACOLA, FL 32502

FEI Number: 59-3519563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C/O SCOTT SANDFORT
BASS AND SANDFORT ACCOUNTANTS
1301 WEST GARDEN STREET
PENSACOLA, FL 32501 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: FURR, JAMES C
Address: 3285 NIGHTTHAWK LANE
City-St-Zip: PENSACOLA, FL 32506

Title: SD (X) Delete
Name: FURR, PATRICIA H
Address: 3285 NIGHTTHAWK LANE
City-St-Zip: PENSACOLA, FL 32506

Title: TD () Delete
Name: LEWIS, JAMES
Address: 3285 NIGHTTHAWK LANE
City-St-Zip: PENSACOLA, FL 32506

Title: VPD () Delete
Name: FURR, M KELLY
Address: 3285 NIGHTTHAWK LN
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: ROBERTS, JANE
Address: 3285 NIGHTTHAWK LANE
City-St-Zip: PENSACOLA, FL 32506

Title: VPD (X) Change () Addition
Name: FURR, KELLY
Address: 424 ETOWAH VALLEY WAY
City-St-Zip: WOODSTOCK, GA 30189

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: J FURR

D

01/21/2009

Electronic Signature of Signing Officer or Director

Date