

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000054007

Entity Name: IEI MANAGEMENT, INC,

FILED  
Jan 08, 2010  
Secretary of State

**Current Principal Place of Business:**

650 S. NORTHLAKE BLVD.  
400  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

650 S. NORTHLAKE BLVD.  
400  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

FEI Number: 27-0411270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CLEMENTS, MICHAEL L  
476 DESOTO DRIVE  
NEW SMYRNA BEACH, FL 32169 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: PS  
Name: CLEMENTS, MICHAEL L  
Address: 476 DESOTO DRIVE  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: ST  
Name: KRUEGER, DONALD A  
Address: 1131 O'DAY COURST  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T  
Name: FERRY, PATRICK J  
Address: 104 SHELLIE CT  
City-St-Zip: LONGWOOD, FL 32779

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

SIGNATURE: MICHAEL L. CLEMENTS

PS

01/08/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date