

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000048660

Entity Name: IDEA GENERATION INC.

FILED  
Apr 27, 2002 8:00 AM  
Secretary of State

**Current Principal Place of Business:**

7257 NW 4TH BLVD  
# 36  
GAINESVILLE, FL 326071799 US

**New Principal Place of Business:**

**Current Mailing Address:**

7257 NW 4TH BLVD  
# 36  
GAINESVILLE, FL 326071799 US

**New Mailing Address:**

FEI Number: 59-3360662      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BEVERLY, PHIL C JR.  
408 W UNIVERSITY AVE, STE 500  
GAINESVILLE, FL 32601 US

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

HAMAN, LAURA  
7257 NW 4TH BLVD  
36  
GAINESVILLE, FL 32607 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: LAURA HAMAN

04/27/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TRINITY, S.  
Address: 7257 NW 4TH BLVD # 36  
City-St-Zip: GAINESVILLE, FL 326071799

Title: V ( ) Delete  
Name: EVERTT, PAULA  
Address: 7257 NW 4TH BLVD # 36  
City-St-Zip: GAINESVILLE, FL 326071799

Title: ST ( ) Delete  
Name: HART, JAMIE  
Address: 7257 NW 4TH BLVD # 36  
City-St-Zip: GAINESVILLE, FL 326071799

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: S. TRINITY

P

04/27/2002

Electronic Signature of Signing Officer or Director

Date