

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000097714

Entity Name: IMAGINE VENTURES INC.

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6707 CANTON ST. SOUTH  
ST. PETERSBURG, FL 33712

**New Principal Place of Business:**

**Current Mailing Address:**

11404 SUNCREEK PL  
TEMPLE TERRACE, FL 33617

**New Mailing Address:**

6707 CANTON ST. SOUTH  
ST. PETERSBURG, FL 33712

FEI Number: 59-3678968

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DREAMWEB OFFICE CONSULTANTS, INC.  
11404 SUNCREEK PLACE  
TAMPA, FL 33617 US

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

DREAMWEB OFFICE CONSULTANTS, INC.  
10106 COURTNEY OAKS CIRCLE  
203  
TAMPA, FL 33619 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: CAROLINE MCKEON

04/14/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: HALL, JEFFREY A  
Address: 6707 CANTON ST. SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33712

Title: VTD  
Name: HALL, SHARON L  
Address: 6707 CANTON ST. SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33712

Title: D  
Name: MCKEON, CAROLINE  
Address: 10106 COURTNEY OAKS CIRCLE 203  
City-St-Zip: TAMPA, FL 33619

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: CAROLINE MCKEON

D

04/14/2011

Electronic Signature of Signing Officer or Director

Date