

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005151

FILED
Jul 05, 2006
Secretary of State

Entity Name: IMPAIRED RISK SPECIALISTS, INC.

Current Principal Place of Business:

1521 BEACH WALKER RD
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

4973 SPANISH OAKS CIRCLE
FERNANDINA BEACH, FL 32034

Current Mailing Address:

1521 BEACH WALKER RD
FERNANDINA BEACH, FL 32034

New Mailing Address:

4973 SPANISH OAKS CIRCLE
FERNANDINA BEACH, FL 32034

FEI Number: 36-3852373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, EDWIN B
1521 BEACHWALKER DR.
FERNANDINA BEACH, FL 32034 US

Name and Address of New Registered Agent:

JOHNSON, EDWIN B
4973 SPANISH OAKS CIRCLE
FERNANDINA BEACH, FL 32034 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: EDWIN B JOHNSON

07/05/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: JOHNSON, EDWIN B
Address: 1521 BEACHWALKER DR.
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: SD () Delete
Name: JOHNSON, JODIE A
Address: 1521 BEACHWALKER DR.
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: JOHNSON, EDWIN B
Address: 4973 SPANISH OAKS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: SD (X) Change () Addition
Name: JOHNSON, SUSAN P
Address: 4973 SPANISH OAKS CIRCLE
City-St-Zip: FERNANDINA BEACH, FL 32034

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWIN B JOHNSON

PRES

07/05/2006

Electronic Signature of Signing Officer or Director

Date