

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005974

FILED  
Apr 20, 2006  
Secretary of State

Entity Name: DMS IMAGING, INC.

**Current Principal Place of Business:**

2101 NORTH UNIVERSITY DRIVE  
FARGO, ND 58102

**New Principal Place of Business:**

**Current Mailing Address:**

2101 NORTH UNIVERSITY DRIVE  
FARGO, ND 58102

**New Mailing Address:**

FEI Number: 45-0386364      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      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: P      ( ) Delete  
Name: CASNER, MARK  
Address: 6160 QUINWOOD LANE NORTH #6219  
City-St-Zip: PLYMOUTH, MN 55422

Title: V      ( ) Delete  
Name: HOGE, CHARLES R  
Address: 1948 ROSECREEK DR S  
City-St-Zip: FARGO, ND 58104

Title: CSD      ( ) Delete  
Name: MOLBERT, LAURIS N  
Address: 4484 OAK CREEK DRIVE  
City-St-Zip: FARGO, ND 58104

Title: T      ( ) Delete  
Name: MOUG, KEVIN  
Address: 715 HACKBERRY DR. S.  
City-St-Zip: FARGO, ND 58104

Title: CEO      ( ) Delete  
Name: SANDERS, WAYNE  
Address: 3520 21ST STREET SOUTH  
City-St-Zip: FARGO, ND 58104

Title: CFO      ( ) Delete  
Name: DODA, MARK  
Address: 282 44TH AVENUE SOUTH  
City-St-Zip: MOORHEAD, MN 56560

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

Title: P      (X) Change ( ) Addition  
Name: DODA, MARK  
Address: 282 44TH AVENUE SOUTH  
City-St-Zip: MOORHEAD, MN 56560

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

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

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

Title: CEO      (X) Change ( ) Addition  
Name: WILSON, PAUL J  
Address: 4739 ROSE CREEK PARKWAY  
City-St-Zip: FARGO, ND 58104

Title: S      (X) Change ( ) Addition  
Name: KOECK, GEORGE A  
Address: 1755 SOUTH 9TH ST  
City-St-Zip: FARGO, ND 58103

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: MARK DODA

P

04/20/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date