

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000291

FILED
Apr 29, 2004
Secretary of State

Entity Name: IMAGESOURCE OFFICE AUTOMATION, INC.

Current Principal Place of Business:

3770 10TH STREET NE
ST PETERSBURG, FL 33703

New Principal Place of Business:

3770 10TH STREET NE
ST PETERSBURG, FL 33704

Current Mailing Address:

3770 10TH STREET NE
ST PETERSBURG, FL 33703

New Mailing Address:

3770 10TH STREET NE
ST PETERSBURG, FL 33704

FEI Number: 52-2220147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARNSWORTH, BARBARA
3770 10TH ST NE
ST PETERSBURG, FL 33703 US

Name and Address of New Registered Agent:

FARNSWORTH, BARBARA
3770 10TH ST NE
ST PETERSBURG, FL 33704 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:

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FARNSWORTH, DAVID
Address: 3770 10TH STREET NE
City-St-Zip: ST PETERSBURG, FL 33703

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FARNSWORTH, DAVID
Address: 3770 10TH STREET NE
City-St-Zip: ST PETERSBURG, FL 33704

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: DAVID FARNSWORTH

P

04/29/2004

Electronic Signature of Signing Officer or Director

Date