

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006872

Entity Name: IMAGINE PROPERTIES II, INC.

FILED
Feb 04, 2008
Secretary of State

Current Principal Place of Business:

5399 E. HWY 30-A
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

5365 E. HWY 30-A
SUITE 104
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

5399 E. HWY. 30-A
SANTA ROSA BEACH, FL 32459

New Mailing Address:

180 W. HOUSTON ST
APT 10-B
NEW YORK, NY 10014

FEI Number: 02-0552702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAMBOR, JEANNE
5399 E. HWY. 30-A
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

KOZAK, BRIAN
9 SWEET BAY DRIVE
SANTA ROSA BEACH, FL 32459 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: BRIAN KOZAK

02/04/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CPST () Delete
Name: JAMBOR, JEANNE B
Address: 5399 E. HWY. 30-A
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPST (X) Change () Addition
Name: JAMBOR, JEANNE B
Address: 180 W. HOUSTON ST, APT 10-B
City-St-Zip: NEW YORK, NY 10014

I hereby certify that the information supplied with this filing does not qualify 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: JEANNE B JAMBOR

CPST

02/04/2008

Electronic Signature of Signing Officer or Director

Date