## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F11000001944

Entity Name: IMDS OF DELAWARE CORPORATION

FILED Jun 12, 2012 Secretary of State

Current Princi	pal Place of Business:	New Principal Place of Business

2100 N ALAFAYA TRAIL SUITE 100 124 SOUTH 600 WEST ORLANDO, FL 32826 LOGAN, UT 84321

Current Mailing Address: New Mailing Address:

2100 N ALAFAYA TRAIL SUITE 100 124 SOUTH 600 WEST ORLANDO, FL 32826 LOGAN, UT 84321

FEI Number: 87-0651879 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

JUSTIN, DANIEL F 2100 N ALAFAYA TRAIL SUITE 100 ORLANDO, FL 32826 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: LINVILLE, HAROLD
Address: 124 SOUTH 600 WEST
City-St-Zip: LOGAN, UT 84321

Title: CEOP

Name: SHIRLEY, BRADY R Address: 124 SOUTH 600 WEST City-St-Zip: LOGAN, UT 84321

Title: DS

Name: DRISCOLL, MARY
Address: 124 SOUTH 600 WEST
City-St-Zip: LOGAN, UT 84321

Title: C

 Name:
 LAWSON, RON

 Address:
 124 SOUTH 600 WEST

 City-St-Zip:
 LOGAN, UT 84321

Title: TCFO

Name: TATE, ROBERT R Address: 124 SOUTH 600 WEST City-St-Zip: LOGAN, UT 84321

Title:

 Name:
 BYRD, JOHN B

 Address:
 124 SOUTH 600 WEST

 City-St-Zip:
 LOGAN, UT 84321

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: BRADY R. SHIRLEY CEOP 06/12/2012