## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J97727

Entity Name: IMAGIFORCE, INC.

**FILED** Mar 25, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

18402 TIMBERLAN 218 E. BEARSS AVENUE LUTZ, FL 33549

#308

TAMPA, FL 33613

**Current Mailing Address: New Mailing Address:** 

218 E. BEARSS AVENUE P.O. BOX 1653

LUTZ, FL 33548 #308

TAMPA, FL 33613

FEI Number: 59-2760334 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:

FORCE, KAREN A VP, ST FORCE, KAREN A VP, ST 18402 TIMBERLAN 218 E. BEARSS AVENUE LUTZ, FL 33549 #308

TAMPA, FL 33613 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: KAREN A. FORCE 03/25/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

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

Title: () Delete Title: (X) Change ( ) Addition

FORCE, ANNE, FORCE, ANNE, Name: Name: 18402 TIMBERLAN 218 E. BEARSS AVENUE, # 308 Address: Address:

City-St-Zip: LUTZ, FL City-St-Zip: TAMPA, FL 33613

Title: Title: ST ST () Delete (X) Change ( ) Addition

Name: FORCE, KAREN, Name: FORCE, KAREN,

18402 TIMBERLAN 218 E. BEARSS AVENUE, #308 Address: Address:

LUTZ, FL TAMPA, FL 33613 City-St-Zip: City-St-Zip:

Title: (X) Change ( ) Addition Title: () Delete FORCE, MICHAEL, Name: FORCE, MICHAEL, Name:

18402 TIMBERLAN 218 E. BEARSS AVENUE, #308 Address: Address:

City-St-Zip: LUTZ, FL City-St-Zip: TAMPA, FL 33613

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.

VΡ SIGNATURE: KAREN A. FORCE 03/25/2009