2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K57373

Entity Name: INNOVATIVE IDEAS, INC.

FILED Apr 29, 2009 Secretary of State

O	binainal Blace of Business	New Principal Place	of Business	
	rincipal Place of Business:	New Principal Place	or business:	
5415 W. C TAMPA, F	CRENSHAW L 33634 US			
Current Mailing Address:		New Mailing Address	New Mailing Address:	
P O BOX 262732 TAMPA, FL 33685 US			5415 W. CRENSHAW ST. TAMPA, FL 33634 US	
FEI Number	: FEI Number Applied For ()	FEI Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		:: Name and Address o	Name and Address of New Registered Agent:	
1200 S. PI	ORATION SYSTEM NE ISLAND ROAD ION, FL 33324 US			
	e named entity submits this statement for t e of Florida.	he purpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registered	Agent	Date	
Election Ca	mpaign Financing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete BLAZIER, RONALD L. 5415 W. CRENSHAW ST. TAMPA, FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete DEVARS, KENNETH P. 5415 W. CRENSHAW ST. TAMPA, FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete DEVARS, KERRY P. 5415 W. CRENSHAW ST. TAMPA, FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete COYLE, JOHN T JR 5415 W CRENSHAW ST TAMPA, FL 33634	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: RONALD L. BLAZIER D 04/29/2009