

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003318

FILED  
Jan 13, 2004  
Secretary of State

Entity Name: IMAGINEISTIC L.L.C.

**Current Principal Place of Business:**

8516 OLD WINTER GARDEN RD  
STE 100  
ORLANDO, FL 32835

**New Principal Place of Business:**

**Current Mailing Address:**

8516 OLD WINTER GARDEN RD  
STE 100  
ORLANDO, FL 32835

**New Mailing Address:**

FEI Number: 59-3697544

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUNNER, WILLIAM J  
5933 BENT PINE DR  
#812  
ORLANDO, FL 32822

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

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

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: BUNNER, WILLIAM J  
Address: 5933 BENT PINE DR #812  
City-St-Zip: ORLANDO, FL 32822

Title: MGRM ( ) Delete  
Name: STOOT, ARIC D  
Address: 11809 HIGHLAND POINT DR  
City-St-Zip: CLERMONT, FL 34711

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: WILLIAM JAY BUNNER

MGRM

01/13/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date