2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# L08000088952

Entity Name: IMPACT MANAGEMENT HOLDINGS, LLC

Current Principal Place of Business:

605 SW PARK ST.
OKEECHOBEE, FL 34973

New Principal Place of Business:

605 SW PARK ST.
SUITE 202
OKEECHOBEE, FL 34974

Current Mailing Address:

PO BOX 1289
OKEECHOBEE, FL 34973

New Mailing Address:

FEI Number: 26-3392591 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLOYD, JOSEPH J
605 SW PARK ST
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

FLOYD, JOSEPH J
605 SW PARK ST
SUITE 202
OKEECHOBEE, FL 34974 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: JOSEPH FLOYD 04/15/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: FLOYD, JOSEPH J
Address: 984 PATRICK DR
City-St-Zip: WEST PALM BEACH, FL 33406

Title: MGRM ( ) Delete
Name: HILYER, MATTHEW R
Address: 13642 7TH AVE. CIR. NE
City-St-Zip: BRADENTON, FL 34212

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 exemption stated in Chapter 119, 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: JOSEPH FLOYD MGRM 04/15/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date