

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000012827

Entity Name: IMA PARTNERSHIP LLC

FILED
Jan 07, 2011
Secretary of State

Current Principal Place of Business:

6329 OLD COURT ST
NORTH PORT, FL 34291

New Principal Place of Business:

Current Mailing Address:

6329 OLD COURT ST
NORTH PORT, FL 34291

New Mailing Address:

FEI Number: 27-1822692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASKEY, PAUL G
6329 OLD COURT ST
NORTH PORT, FL 34291 US

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/MANAGERS:

Title: MGRM
Name: KASKEY, PAUL G
Address: 6329 OLD COURT ST
City-St-Zip: NORTH PORT, FL 34291

Title: MGRM
Name: KASKEY, SANDRA W
Address: 6329 OLD COURT ST
City-St-Zip: NORTH PORT, FL 34291

Title: MGRM
Name: HOLMES, JAY
Address: 861 SINCLAIR DR
City-St-Zip: SARASOTA, FL 34240

Title: MGRM
Name: HOLMES, RHONDA
Address: 861 SINCLAIR DR
City-St-Zip: SARASOTA, FL 34240

I hereby 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: SANDRA W KASKEY

MGRM

01/07/2011

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