

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L41687

FILED
Jan 24, 2006
Secretary of State

Entity Name: IMAGE BUILDERS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

8803 LAKE MABEL DRIVE
ORLANDO, FL 32836 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2094
WINDERMERE, FL 34786 US

New Mailing Address:

FEI Number: 59-2982194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARVEY, TOM GORDON
8803 LAKE MABEL DRIVE
ORLANDO, FL 32836 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HARVEY, TOM GORDON,
Address: 8803 LAKE MABLE DRIVE
City-St-Zip: ORLANDO, FL 32836

Title: ST () Delete
Name: HARVEY, SANDRA MAE,
Address: 8803 LAKE MABEL DRIVE
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HARVEY, TOM GORDON,
Address: 8803 LAKE MABEL DRIVE
City-St-Zip: ORLANDO, FL 32836

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 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: SANDRA MAE HARVEY

ST

01/24/2006

Electronic Signature of Signing Officer or Director

Date