

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L50245

FILED
Jan 08, 2004
Secretary of State

Entity Name: IMAGINEERING PARTNERS, INC.

Current Principal Place of Business:

5028 BURWELL ROAD
WEBSTER, FL 335976318

New Principal Place of Business:

Current Mailing Address:

5028 BURWELL ROAD
WEBSTER, FL 335976318

New Mailing Address:

FEI Number: 59-3016996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENFELDER, GLEN E.
103 NORTH THIRD STREET
DADE CITY, FL 33525 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: THOMPSON, PATRICIA,
Address: 5028 BURWELL ROAD
City-St-Zip: WEBSTER, FL

Title: S () Delete
Name: BECKY HARPER,
Address: 34273 RIDGE MANOR BLVD
City-St-Zip: RIDGE MANOR, FL

Title: D () Delete
Name: PARRISH C THOMPSON,
Address: 5028 BURWELL RD
City-St-Zip: WEBSTER, FL 33597

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THOMPSON, PATRICIA,
Address: 5028 BURWELL ROAD
City-St-Zip: WEBSTER, FL 335979318

Title: S (X) Change () Addition
Name: BECKY HARPER,
Address: 34273 RIDGE MANOR BLVD
City-St-Zip: RIDGE MANOR, FL 33525

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 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: PATRICIA THOMPSON

P

01/08/2004

Electronic Signature of Signing Officer or Director

Date