

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002387

FILED
Aug 31, 2005
Secretary of State

Entity Name: FUTURE IMAGES, INCORPORATED

Current Principal Place of Business:

226 LANG ROAD
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

226 LANG ROAD
FORT WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 59-3714181 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FARROW, WILLIE A
226 LANG ROAD
FORT WALTON BEACH, FL 32547 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PERS () Delete
Name: FARROW, WILLIE A PRESIDE
Address: 113 PORT DRIVE
City-St-Zip: SHALIMAR, FL 32579

Title: TRES () Delete
Name: JENNINGS, LEWIS
Address: 605 MOONEY ROAD
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: SEC () Delete
Name: FARROW, SHAROW D
Address: 618 GAP CREEK ROAD # 16
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: DIR () Delete
Name: FARROW, GARRIE A
Address: 618 GAP CREEK ROAD #16
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PERS (X) Change () Addition
Name: JENNINGS, LEWIS PRESIDE
Address: 605 MOONEY RD
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: TRES (X) Change () Addition
Name: FARROW, GARRIE A
Address: 618 GAP CREEK ROAD
City-St-Zip: FORT WALTON BEACH, FL 32548

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARRIE A. FARROW

TRES

08/31/2005

Electronic Signature of Signing Officer or Director

Date