2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# N01000003480

Entity Name: IMAGEN, INC.

Current Principal Place of Business:

4365 KENNEDY AVE
ORLANDO, FL 32812

New Principal Place of Business:

12278 E. COLONIAL DRIVE
SUITE 400
ORLANDO, FL 32826

Current Mailing Address:

4365 KENNEDY AVE
ORLANDO, FL 32812

New Mailing Address:

12278 E. COLONIAL DRIVE
SUITE 400
ORLANDO, FL 32826

FEI Number: 59-3740833 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GONZALEZ, GARY
2232 CYPRESS TRACE CIRCLE
ORLANDO, FL 32825 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

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GONZALEZ, GARY
Address: 2232 CYPRESS TRACE CIRCLE
City-St-Zip: ORLANDO, FL 32825

Title: D ( ) Delete
Name: CANDELARIO, ROBERTO
Address: 2150 SUNSET TERR DR
City-St-Zip: ORLANDO, FL 32825

Title: D ( ) Delete
Name: LOPEZ, LUIS
Address: 13651 SW 20TH ST
City-St-Zip: MIRAMAR, FL 33027

Title: D ( ) Delete
Name: LANDRAU, PETER
Address: 1577 AVLEIGH CIR
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: GARY GONZALEZ D 04/25/2005

Electronic Signature of Signing Officer or Director — Date