

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003480

FILED
Apr 29, 2009
Secretary of State

Entity Name: IMAGEN, INC.

Current Principal Place of Business:

1910 SOUTH TANNER ROAD
ORLANDO, FL 32820

New Principal Place of Business:

9837 EAST COLONIAL DRIVE
ORLANDO, FL 32817

Current Mailing Address:

1910 SOUTH TANNER ROAD
ORLANDO, FL 32820

New Mailing Address:

P.O. BOX 677367
ORLANDO, FL 32867

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
1910 SOUTH TANNER ROAD
ORLANDO, FL 32820 US

Name and Address of New Registered Agent:

GONZALEZ, GARY
9837 EAST COLONIAL DRIVE
ORLANDO, FL 32817 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:

04/29/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GONZALEZ, GARY
Address: 1910 SOUTH TANNER ROAD
City-St-Zip: ORLANDO, FL 32820

Title: D () Delete
Name: GONZALEZ, CONSTANCE
Address: 1910 SOUTH TANNER ROAD
City-St-Zip: ORLANDO, FL 32820

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GONZALEZ, GARY
Address: 9837 EAST COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: D (X) Change () Addition
Name: GONZALEZ, CONSTANCE
Address: 9837 EAST COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: D () Change (X) Addition
Name: COLON, REINALDO
Address: 9837 EAST COLONIAL DRIVE
City-St-Zip: ORLANDO, FL 32817

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CONSTANCE H GONZALEZ

D

04/29/2009

Electronic Signature of Signing Officer or Director

Date