2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2006
Secretary of State

DOCUMENT# N04000010484

Entity Name: AERIAL IMPRESSIONS, INC.

Current Principal Place of Business:

5611 FIRST ST., #22
ZEPHYRHILLS, FL 33542

New Principal Place of Business:

10326 DUSTY HILL LOOP
DADE CITY, FL 33525

Current Mailing Address:

5611 FIRST ST., #22
ZEPHYRHILLS, FL 33542

New Mailing Address:

P.O. BOX 2488
ZEPHYRHILLS, FL 33539

FEI Number: 20-2304799 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, STEVEN R
5611 FIRST ST., #22
ZEPHYRHILLS, FL 33542 US

Name and Address of New Registered Agent:

JOHNSON, STEVEN R
10326 DUSTY HILL LOOP
DADE CITY, FL 33525 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: _____ 04/30/2006
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: JOHNSON, STEVEN R
Address: 5611 FIRST ST., #22
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: D ( ) Delete
Name: DAVIS, PETER D
Address: 4006 CEDAR KEY CIRCLE
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete
Name: PORTER, RICHARD G
Address: 2603 MERIDA LANE
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: JOHNSON, STEVEN R
Address: 10326 DUSTY HILL LOOP
City-St-Zip: DADE CITY, FL 33525

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 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: STEVEN R JOHNSON D 04/30/2006
Electronic Signature of Signing Officer or Director — Date