

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007879

FILED  
Mar 25, 2009  
Secretary of State

Entity Name: IMMERVED, INC.

## Current Principal Place of Business:

213 FREDDIE STREET  
INDIAN HARBOUR BEACH, FL 32937

## New Principal Place of Business:

204 EMERALD DRIVE N  
INDIAN HARBOUR BEACH, FL 32937

## Current Mailing Address:

213 FREDDIE STREET  
INDIAN HARBOUR BEACH, FL 32937

## New Mailing Address:

204 EMERALD DRIVE N  
INDIAN HARBOUR BEACH, FL 32937

FEI Number: 20-3259902

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

IVERSON, JAMES  
213 FREDDIE STREET  
INDIAN HARBOR BEACH, FL 32937 US

## Name and Address of New Registered Agent:

MIILLER, TIM MR.  
204 EMERALD DRIVE N  
INDIAN HARBOUR BEACH, FL 32937 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: TIM MILLER

03/25/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: IVERSON, JAMES  
Address: 213 FREDDIE STREET  
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

Title: D ( ) Delete  
Name: MILLER, TIM  
Address: 330 BAHAMA DRIVE  
City-St-Zip: INDIALANTIC, FL 32903

Title: D (X) Delete  
Name: MARTINEZ, IVAN  
Address: 220 BRY LYNN DRIVE  
City-St-Zip: W MELBOURNE, FL 32904

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change ( ) Addition  
Name: MILLER, TIM  
Address: 204 EMERALD DRIVE N  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: MR (X) Change ( ) Addition  
Name: MARTINEZ, IVAN  
Address: 500 N DUKE STREET  
City-St-Zip: DURHAM, NC 27701

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

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: TIM MILLER

MR.

03/25/2009

Electronic Signature of Signing Officer or Director

Date