## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36235

Entity Name: THE IMAGINARIUM GROUP, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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2000 CRANFORD AVE. FT. MYERS, FL 33916

Current Mailing Address: New Mailing Address:

2000 CRANFORD AVE. FT. MYERS, FL 33916

FEI Number: 65-0226984 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FITZGERALD, CRYSTAL

641 TRAVERS AVE

FORT MYERS, FL 33919 US

MATHEW, JOHNSON
2000 CRANFORD AVE
FORT MYERS, FL 33916 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: MATHEW JOHNSON 04/30/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Name:

Address:

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:VP ( ) DeleteTitle:P (X) Change ( ) AdditionName:WEISINGER, DENICEName:WEISINGER, DENICEAddress:7262 HEAVEN LNAddress:7262 HEAVEN LN

Address: 7262 HEAVEN LN

City-St-Zip: FORT MYERS, FL 33908

Address: 7262 HEAVEN LN

City-St-Zip: FORT MYERS, FL 33908

City-St-Zip: FORT MYERS, FL 33908

Title: T ( ) Delete Title: VP (X) Change ( ) Addition Name: DISERIO, GREGORY Name: GRAVELY, BRITTNEY

Address: DAVID JONES & ASSOC. 2221 MCGREGOR Address: 2000 CRANFORD AVE City-St-Zip: FORT MYERS, FL 33901 City-St-Zip: FORT MYERS, FL 33901

Title: S () Delete Title: TR (X) Change () Addition Name: GRAFF, ERIC Name: SMITH, RAMSEY

Address: 1945 ORTIZ AVE Address: 1415 HENDRY STREET

City-St-Zip: FORT MYERS, FL 33905 City-St-Zip: FORT MYERS, FL 33901

Title: P (X) Delete Title: ( ) Change ( ) Addition

FITZGERALD, CRYSTAL

641 TRAVERS AVE

FT. MYERS, FL 33919

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: RAMSEY SMITH TR 04/30/2009