

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000106357

FILED
Apr 28, 2003
Secretary of State

Entity Name: INTEGRATED MARKETING SOLUTIONS, INC.

Current Principal Place of Business:

711 S. HOWARD AVENUE
SUITE 200
TAMPA, FL 33606

New Principal Place of Business:

313 SOUTH HOWARD AVENUE
SUITE 8
TAMPA, FL 33606

Current Mailing Address:

711 S. HOWARD AVENUE
SUITE 200
TAMPA, FL 33606

New Mailing Address:

FEI Number: 65-1085888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINA, OLGA M ESQ.
FOWLER, WHITE, GILLEN, BOGGS VILLAREAL PA
501 E. KENNEDY BLVD. SUITE 700
TAMPA, FL 33602 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P/S () Delete
Name: NICKERSON, TERRI
Address: 711 S. HOWARD AVENUE SUITE 200
City-St-Zip: TAMPA, FL 33606

Title: V/T () Delete
Name: STORM, KELLY
Address: 711 S. HOWARD AVENUE SUITE 200
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/S (X) Change () Addition
Name: NICKERSON, TERRI
Address: 311 SOUTH HOWARD AVENUE, SUITE 8
City-St-Zip: TAMPA, FL 33606

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERRI NICKERSON

P/S

04/28/2003

_____ Electronic Signature of Signing Officer or Director

_____ Date