

**2004 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P 02000027504

1. Entity Name

Imagine That of Volusia



FILED

04 NOV 18 PM 1:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REINSTATEMENT** 04

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

3. Mailing Address

3566 Sugar Plum Lane 1515 Ridgewood Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Port Orange FL Holly Hill FL

03-0398722

32119 Volusia

32117 Volusia

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip

**DO NOT WRITE  
IN THIS SPACE**

JOE Loguidice

1515 Ridgewood Ave

Holly Hill

FL

32117

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and file if applicable.

(Not: Registered agent signature required when reinstating)

DATE

JL

11/10/04

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME Don Peterson  
STREET ADDRESS 3566 Sugar Plum Lane  
CITY- ST- ZIP Port Orange FL 32119

TITLE D  
NAME Michelle Peterson  
STREET ADDRESS 3566 Sugar Plum Lane  
CITY- ST- ZIP Port Orange FL 32119

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**DO NOT WRITE  
IN THIS SPACE**

JR 11/24

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Photo &

Don Peterson

11/10/04

Florida Department of State  
Attn: (UBR 2004)  
P O Box 6327  
Tallahassee, FL 32314-6327

November 12, 2004

Dear Sir or Madam:

As per our conversation 11/10/04 with your office, this letter is to inform your office that

We never received our first two reports for the 2004 uniform business report. Our office spoke with a Supervisor this person advised me to let your office know of the correct address.

Your office also said all penalty fees would be waved due to the problems our company had with the mail and hurricanes.

Furthermore due to the hurricanes we were put behind in any processing of mail and bill paying.

Please make the Correct changes to my records and file my corporation UBR from for 2004.

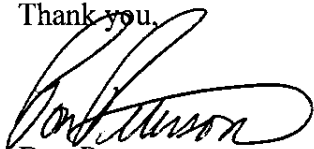
Thank you for your time in concerning this matter.

Sincerely,  
Imagine That of Volusia Inc

To Whom It May Concern:

Due to the hurricanes and the storing of all important papers, the Annual Report notice was just located. Please accept my \$150.00 payment per 10/14/2004 phone conversation.

Thank you,

A handwritten signature in cursive script, appearing to read "Don Peterson".

Don Peterson  
Imagine That of Voluisa, Inc.  
3566 Sugarplum Lane  
Port Orange, FL 32129