2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015588

Entity Name: IMPACT EVENT MANAGEMENT, INC.

FILED May 30, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Current Principal Place of Business:	New Principal Place of Business

412 BELTREES STREET 10550 BERMUDA ISLE DRIVE

DUNEDIN, FL 34698 TAMPA, FL 33647

Current Mailing Address: New Mailing Address:

412 BELTREES STREET 10550 BERMUDA ISLE DRIVE

DUNEDIN, FL 34698 TAMPA, FL 33647

FEI Number: 26-0058550 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:

PILLER, JOSHUA P 5436 FRUITVILLE ROAD #201 SARASOTA, FL 34232 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 FABI-PILLER, ELIZABETH S
 Name:
 FABI-PILLER, ELIZABETH S

 Address:
 412 BELTREES STREET
 Address:
 10550 BERMUDA ISLE DRIVE

City-St-Zip: DUNEDIN, FL 34698 City-St-Zip: TAMPA, FL 33647

Title: VP,S () Delete Title: () Change () Addition

 Name:
 PILLER, JOSHUA P
 Name:

 Address:
 5436 FRUITVILLE ROAD #201
 Address:

 City-St-Zip:
 SARASOTA, FL 34232
 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH S. FABI-PILLER P,T 05/30/2008