

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000079813

FILED  
Jan 13, 2005  
Secretary of State

Entity Name: DIMENSIONAL IMAGING, INC.

**Current Principal Place of Business:**

2 N TUTTLE AVE  
SARASOTA, FL 34237

**New Principal Place of Business:**

**Current Mailing Address:**

2 N TUTTLE AVE  
SARASOTA, FL 34237

**New Mailing Address:**

FEI Number: 55-0840868

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HERSEM, THOMAS G  
1421 COURT STREET  
SUITE B  
CLEARWATER, FL 33756 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: PSTD ( ) Delete  
Name: NIXON, SAMUEL F III  
Address: 2893 KENSINGTON TRACE  
City-St-Zip: TARPON SPRINGS, FL 34688

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: SAMUEL F. NIXON III

PRES

01/13/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date