

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157370

FILED
Feb 23, 2005
Secretary of State

Entity Name: INFORMATION MANAGEMENT FORUM, INC.

Current Principal Place of Business:

215 CELEBRATION PLACE
SUITE 500
CELEBRATION, FL 34743

New Principal Place of Business:

2432 BEL-AIR CIR
KISSIMMEE, FL 34743

Current Mailing Address:

215 CELEBRATION PLACE
SUITE 500
CELEBRATION, FL 34743

New Mailing Address:

2432 BEL-AIR CIR
KISSIMMEE, FL 34743

FEI Number: 20-0572531

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROFESSIONAL ACCOUNTANTS & CONSULTANTS, IN
1157 WEST STATE ROAD 436
SUITE 205
ALTAMONTE SPRINGS, FL 32714 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: PD () Delete
Name: WINSOR, EDWARD L
Address: 215 CELEBRATION PLACE
City-St-Zip: CELEBRATION, FL 34743

Title: VD (X) Delete
Name: WEDICK, JESSE
Address: 215 CELEBRATION PLACE
City-St-Zip: CELEBRATION, FL 34743

Title: STD (X) Delete
Name: PERDOMO, ALAN
Address: 215 CELEBRATION PLACE
City-St-Zip: CELEBRATION, FL 34743

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTS (X) Change () Addition
Name: WINSOR, EDWARD L
Address: 2432 BEL-AIR CIR
City-St-Zip: KISSIMMEE, FL 34743

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EDWARD L WINDSOR

PTS

02/23/2005

Electronic Signature of Signing Officer or Director

Date