

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000047759

FILED
May 12, 2009
Secretary of State

Entity Name: IDEALOGIX, INC.

Current Principal Place of Business:

7171 NORTH DAVIS HWY
F33
PENSACOLA, FL 32504

New Principal Place of Business:

8438 HARBOUR SQ DR
PENSACOLA, FL 32514

Current Mailing Address:

7171 NORTH DAVIS HWY
F33
PENSACOLA, FL 32504

New Mailing Address:

8438 HARBOUR SQ DR
PENSACOLA, FL 32514

FEI Number: 20-0908194

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESURE, MICHAEL
485 MEANDER LN
CANTONMENT, FL 32533 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

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:

Title: D () Delete
Name: MESURE, MICHAEL
Address: 485 MEANDER LN
City-St-Zip: CANTONMENT, FL 32533

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 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: MICHAEL MESURE

CEO

05/12/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date