2006 FOR PROFIT CORPORATION

Apr 03, 2006 8:00 am Secretary of State ANNUAL REPORT 04-03-2006 90379 045 ***150.00 DOCUMENT # P04000089218 1. Entity Name IMAGINE THIS ... IN STONE!, INC. 60024480 Principal Place of Business Mailing Address 1702 LANGLEY AVENUE 1702 LANGLEY AVENUE UNIT A UNIT A DELAND, FL 32724 DELAND, FL 32724 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02212006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 20-1209622 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HUGHES, LAURA J Street Address (P.O. Box Number is Not Acceptable) 3801 STRAWBERRY LANE NEW SMYRNA-BEACH-FL 32168 City Zip Code 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 little if applicable (NOTE Registered Agent signature required when reinstation) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 IIIIF ☐ Delete FITLE ☐ Addition NAME HUGHES, LAURA J NAME 3801 STRAWBERRY LANE STREET ADORESS STREET ADDRESS CITY-SI-ZIP NEW SMYRNA BEACH, FL 32168 CITY-ST-ZIP SEC TITLE ☐ Delete TITLE ☐ Change ☐ Addition APPLEGREN, JANET L NAMÉ NAME STREET ADDRESS 777 BENNETT ROAD STREET ADDRESS CITY-ST-ZIP SOUTH DAYTONA, FL 32119 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition JACQUES, RANDOLPH D 6105 JASMINE VINE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIPT PORT ORANGE, FL 32776 CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition NAME NAME GANT, Michael (STREET ADDRESS STREET ADDRESS 2444 S. Nova Road, writ 2 CITY-ST-ZIP CITY-ST-ZIP South Daytona Fi ☐ Addition TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if

SIGNATURE

FILED