

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P36229

FILED
Jan 06, 2009
Secretary of State

Entity Name: AUDIO VISUAL IMAGINEERING, INC.

Current Principal Place of Business:

8440 TRADEPORT DRIVE
SUITE 109
ORLANDO, FL 32827 US

New Principal Place of Business:

Current Mailing Address:

8440 TRADEPORT DRIVE
SUITE 109
ORLANDO, FL 32827 US

New Mailing Address:

FEI Number: 54-1157582 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CFRA LLC
CORPORATE CENTER THREE AT INT'L PLAZA
4221 W. BOY SCOUT BLVD, 10TH FLOOR
TAMPA, FL 336075736 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: P () Delete
Name: DAVIS, WARD
Address: 5912 COVE DR.
City-St-Zip: ORLANDO, FL 32812

Title: ST () Delete
Name: YOUNG, JOANNE
Address: 10768 S TROPICAL TRL
City-St-Zip: MERRITT ISLAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change () Addition
Name: YOUNG, JOANNE
Address: 10768 S TROPICAL TRL
City-St-Zip: MERRITT ISLAND, FL 32952

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: JOANNE YOUNG

ST

01/06/2009

Electronic Signature of Signing Officer or Director

Date