2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000048660

Entity Name: IDEA GENERATION INC.

City-St-Zip:

GAINESVILLE, FL 326071799

Apr 27, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7257 NW 4TH BLVD #36 GAINESVILLE, FL 326071799 US **New Mailing Address: Current Mailing Address:** 7257 NW 4TH BLVD #36 GAINESVILLE, FL 326071799 US FEI Number: 59-3360662 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: BEVERLY, PHIL C JR. HAMAN, LAURA 408 W UNIVERSITY AVE, STE 500 7257 NW 4TH BLVD GAINESVILLE, FL 32601 GAINESVILLE, FL 32607 US 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: LAURA HAMAN 04/27/2002 Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition TRINITY, S. Name: Name: 7257 NW 4TH BLVD # 36 Address: Address: City-St-Zip: GAINESVILLE, FL 326071799 City-St-Zip: Title: Title: () Change () Addition () Delete Name: EVERTT, PAULA Name: 7257 NW 4TH BLVD # 36 Address: Address: GAINESVILLE, FL 326071799 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition HART, JAMIE Name: Name: 7257 NW 4TH BLVD # 36 Address: Address

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.

City-St-Zip:

SIGNATURE: S. TRINITY P 04/27/2002