

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000104593

Entity Name: IMAGINATION CONCEPTS, LTD., INC.

FILED
Jun 21, 2005
Secretary of State

Current Principal Place of Business:

ATTN: PHYLLIS ADAMS
8466 N. LOCKWOOD RIDGE ROAD #132
SARASOTA, FL 342434338 US

New Principal Place of Business:

Current Mailing Address:

ATTN: PHYLLIS ADAMS
8466 N. LOCKWOOD RIDGE ROAD #132
SARASOTA, FL 342434338 US

New Mailing Address:

FEI Number: 65-0713260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOIGHT, STEPHEN F PA
2414 BEE RIDGE ROAD
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

ADAMS, PHYLLIS
8466 N. LOCKWOOD RIDGE RD.
132
SARASOTA, FL 34249 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: PHYLLIS LYONS-ADAMS

06/21/2005

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: P () Delete
Name: LYONS, PHYLLIS
Address: 8127 50TH ST. CIRCLE E.
City-St-Zip: SARASOTA, FL

Title: VP () Delete
Name: ADAMS, MICHAEL A.
Address: 8127 50TH ST. CIRCLE E.
City-St-Zip: SARASOTA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LYONS, PHYLLIS
Address: 8466 N. LOCKWOOD RIDGE RD. # 132
City-St-Zip: SARASOTA, FL 34243

Title: VP (X) Change () Addition
Name: ADAMS, MICHAEL A.
Address: 8466 N. LOCKWOOD RIDGE RD.
City-St-Zip: SARASOTA, FL 34243

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: PHYLLIS LYONS-ADAMS

P

06/21/2005

Electronic Signature of Signing Officer or Director

Date