2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2001 08:00 AM
Secretary of State

DOCUMENT # **P97000012348**

1. Entity Name
I.M.P.A.C.T. - INTERACTIVE MULTIMEDIA PRODUCTS AND COM
PUTER TECHNOLOGIES, INC.

Principal Place of Business	Mailing Address
13155 SOUTH LEATHERLEAF DRIVE	13155 SOUTH LEATHERLEAF DRIVE
JACKSONVILLE FL 32225	JACKSONVILLE FL 32225

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
607 KENSIGNTON COURT	P.O. BOX 29137
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FORT WALTON BEACH FL	City & State: SAN FRANCISCO CA
Zip: 32548 Country: US	Zip: 94129 Country: US

4. FEI Number **59-3423474** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VAN DYKE MIKE	Name: VAN DYKE MIKE
13155 SOUTH LEATHERLEAF DRIVE	Street Address (P.O. Box Number is Not Acceptable): 607 KENSIGNTON COURT
JACKSONVILLE FL	City: FORT WALTON BEACH **FL** Zip Code: 32548
32225 US	

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.

SIGNATURE ________________ 05/01/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	C	☐ Delete	TITLE	CHAI	☒ Change ☐ Addition
NAME	BURKLAND JEFF		NAME	BURKLAND JEFF	
STREET ADDRESS	1228 NE 12 TERRACE		STREET ADDRESS	607 KENSIGNTON COURT	
CITY-ST-ZIP	GAINESVILLE FL 32601		CITY-ST-ZIP	FORT WALTON BEACH FL 32548	
TITLE	P	☐ Delete	TITLE	CEO	☒ Change ☐ Addition
NAME	VAN DYKE MIKE		NAME	VAN DYKE MIKE	
STREET ADDRESS	1228 NE 12 TERRACE		STREET ADDRESS	607 KENSIGNTON COURT	
CITY-ST-ZIP	GAINESVILLE FL 32601		CITY-ST-ZIP	FORT WALTON BEACH FL 32548	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E034 (11/00)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MIke Van Dyke CEO 05/01/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #