2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000021681

Entity Name: IMS CATASTROPHE TRAINING CENTER, INC.

FILED Mar 26, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

1101 6TH AVENUE WEST
SUITE 120
BRADENTON, FL 34209
BRADENTON, FL 34205

Current Mailing Address: New Mailing Address:

1101 6TH AVENUE WEST 2221 59TH ST W SUITE 120 BRADENTON, FL 34209 BRADENTON, FL 34205

FEI Number: 65-0738799 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOHNSON, CHARLES F. I ESQ. BLALOCK, LANDERS, ET AL 802 11TH STREET, W BRADENTON, FL 34205 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 VPD
 () Delete
 Title:
 VPD
 (X) Change () Addition

 Name:
 IERULLI, STEPHEN M
 Name:
 IERULLI, STEPHEN M

 Address:
 1101 6TH AVENUE WEST #120
 Address:
 2221 59TH ST W

City-St-Zip: BRADENTON, FL 34205 City-St-Zip: BRADENTON, FL 34209

Title: Title: ST () Delete ST (X) Change () Addition Name: ROSIER, ELAINE J. Name: ROSIER, ELAINE J. 1101 6TH AVE W, SUITE 114 2221 59TH ST W Address: Address: BRADENTON, FL 34205 BRADENTON, FL 34209 City-St-Zip: City-St-Zip:

Title: P () Delete Title: P (X) Change () Addition Name: BARBOUR, CHRISTINA C. Name: BARBOUR, CHRISTINA C.

Address: 1101 6TH AVE W, SUITE 114 Address: 2221 59TH ST W

City-St-Zip: BRADENTON, FL 34205 City-St-Zip: BRADENTON, FL 34209

Title: VPD () Delete Title: VPD (X) Change () Addition

 Name:
 IERULLI, NICHOLAS F
 Name:
 IERULLI, NICHOLAS F

 Address:
 1101 6TH AVE W, SUITE 114
 Address:
 2221 59TH ST W

 City-St-Zip:
 BRADENTON, FL 34205
 City-St-Zip:
 BRADENTON, FL 34209

I hereby certify that the information supplied with this filing does not qualify for the 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: ELAINE ROSIER ST 03/26/2007