

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S39225

FILED
Apr 16, 2004
Secretary of State

Entity Name: PROFESSIONAL RECORDS IMAGING MANAGEMENT, INC.

Current Principal Place of Business:

921 SKIPPER AVE
FT. WALTON BEACH, FL 32547 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 58
SHALIMAR, FL 32579

New Mailing Address:

FEI Number: 59-3066563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLONI, DEBORAH
1396 WINDWARD LANE
NICEVILLE, FL 32578

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: SCOTT, LARRY,
Address: 151 REGIONS WAY BLDG 5 SUITE D
City-St-Zip: DESTIN, FL

Title: D () Delete
Name: CARLONI, JOE,
Address: 1396 WINDWARD LANE
City-St-Zip: NICEVILLE, FL 33578

Title: S () Delete
Name: CARLONI, DEBORAH
Address: 1396 WINDWARD AVE
City-St-Zip: NICEVILLE, FL 32578

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SCOTT, LARRY,
Address: 4129 INDIAN TRAIL
City-St-Zip: DESTIN, FL 32541

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

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

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: DEBORAH CARLONI

S

04/16/2004

Electronic Signature of Signing Officer or Director

Date