

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K66928

Entity Name: INDIGO PRODUCTIONS, INC.

FILED  
Apr 04, 2005  
Secretary of State

## Current Principal Place of Business:

9829 TERRACE TRAIL LANE  
TAMPA, FL 336375058 US

## New Principal Place of Business:

## Current Mailing Address:

9829 TERRACE TRAIL LANE  
TAMPA, FL 336375058 US

## New Mailing Address:

FEI Number: 59-2932636

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPRINGER, DAVID G.  
9829 TERRACE TRAIL LANE  
TAMPA, FL 336375058 US

## Name and Address of New Registered Agent:

SPRINGER, DAVID G.  
9829 TERRACE TRAIL LANE  
TAMPA, FL 336375058 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: DAVID G. SPRINGER

04/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: SPRINGER, DAVID G.,  
Address: 9829 TERRACE TRAIL LANE  
City-St-Zip: TAMPA, FL 33637

Title: DVS ( ) Delete  
Name: SPRINGER, BELINDA C  
Address: 9829 TERRACE TRAIL LN  
City-St-Zip: TAMPA, FL 336375058

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition  
Name: SPRINGER, DAVID G  
Address: 9829 TERRACE TRAIL LANE  
City-St-Zip: TAMPA, FL 33637

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: DAVID G SPRINGER

DPT

04/04/2005

Electronic Signature of Signing Officer or Director

Date