

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000004775

FILED
Apr 20, 2011
Secretary of State

Entity Name: THE IMPACT MOVEMENT, INC.

Current Principal Place of Business:

2250 LEE RD STE 202
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 607803
ORLANDO, FL 328607803

New Mailing Address:

FEI Number: 81-0596936 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR STE A
TALLAHASSEE, FL 32301 US

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

OFFICERS AND DIRECTORS:

Title: P
Name: GILMER, CHARLES
Address: P.O. BOX 607803
City-St-Zip: ORLANDO, FL 328607803 US

Title: T
Name: HERSEY, GREGORY J
Address: P.O. BOX 607803
City-St-Zip: ORLANDO, FL 328607803 US

Title: S
Name: FRITZ, THOMAS G
Address: P.O. BOX 607803
City-St-Zip: ORLANDO, FL 328607803

Title: D
Name: HOOD, RACHELLE
Address: P.O. BOX 607803
City-St-Zip: ORLANDO, FL 328607803 US

Title: D
Name: BATTLE, KEITH
Address: P.O. BOX 607803
City-St-Zip: ORLANDO, FL 328607803 US

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES V GILMER

P

04/20/2011

Electronic Signature of Signing Officer or Director

Date