

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000007073

FILED
Apr 28, 2009
Secretary of State

Entity Name: IMA OF TEXAS, INC.

Current Principal Place of Business:

8401 N. CENTRAL EXPRESSWAY, SUITE 225
DALLAS, TX 75225

New Principal Place of Business:

14185 DALLAS PARKWAY
SUITE 800
DALLAS, TX 75254

Current Mailing Address:

8401 N. CENTRAL EXPRESSWAY, SUITE 225
DALLAS, TX 75225

New Mailing Address:

14185 DALLAS PARKWAY
SUITE 800
DALLAS, TX 75254

FEI Number: 20-2045376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WATSON, KURT D
Address: 8200 EAST 32ND ST
City-St-Zip: WICHITA, KS 67226

Title: DT () Delete
Name: LYNCH, MICHAEL D
Address: 8200 EAST 32ND ST NORTH
City-St-Zip: WICHITA, KS 67226

Title: DP () Delete
Name: WEBER, DARRIN J
Address: 8401 NORTH CENTRAL EXPRESSWAY SUITE 225
City-St-Zip: DALLAS, TX 75225

Title: S () Delete
Name: SCHULTZ, SUEANN
Address: 1251 SW ARROWHEAD RD SUITE C
City-St-Zip: TOPEKA, KS 66604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DP (X) Change () Addition
Name: WEBER, DARRIN J
Address: 14185 DALLAS PARKWAY, SUITE 800
City-St-Zip: DALLAS, TX 75254

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

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL D LYNCH

DT

04/28/2009

Electronic Signature of Signing Officer or Director

_____ Date