

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000066884

**FILED**  
**Mar 18, 2008**  
**Secretary of State**

**Entity Name:** INFORMATION MANAGEMENT INC.

**Current Principal Place of Business:**

INFORMATION MANAGEMENT INC  
7906 AUTUMNWOOD DRIVE  
ORLANDO, FL 32825

**New Principal Place of Business:**

INFORMATION MANAGEMENT INC  
1451 GREAT SHOALS DR.  
LAWRENCEVILLE, GA 30045

**Current Mailing Address:**

7906 AUTUMNWOOD DRIVE  
ORLANDO, FL 32825

**New Mailing Address:**

INFORMATION MANAGEMENT INC  
1451 GREAT SHOALS DR.  
LAWRENCEVILLE, GA 30045

FEI Number: 59-3732980

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CROPPER, PAUL B MR  
7906 AUTUMNWOOD DR.  
ORLANDO, FL 32825 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: PSTD ( ) Delete  
Name: CROPPER, TZULAN C  
Address: 7906 AUTUMNWOOD DRIVE  
City-St-Zip: ORLANDO, FL 32825

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: CROPPER, TZULAN C  
Address: 1451 GREAT SHOALS DR  
City-St-Zip: LAWRENCEVILLE, GA 30045

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: TZULAN CHIU CROPPER

PSTD

03/18/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date