

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL				
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nours per respons	se 0.5			

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)								
1. Name and Address of ReALLEN MARK WIT		2. Date of Event Requiring Statement (Month/Day/Year) 07/14/2008			3. Issuer Name and Ticker or Trading Symbol IMAGINE MEDIA LTD [none]			
(Last) (First 1155 SHERMAN STE				Issuer	Issuer		5. If Amendment, Date Original Filed(Month/Day/Year) 6. Individual or Joint/Group Filing(Check Applicable Line) _X Form filed by One Reporting Person	
(Stree	et)			_X_ Director				
DENVER, CO 80203					celeny	001011)	Form fi	led by More than One Reporting Person
(City) (State	e) (Zip)		Table I - Non-Derivative Securities Beneficially Owned					
1. Title of Security (Instr. 4)			В		of Securities ly Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indire (Instr. 5)	ect Beneficial Ownership
common stock			10	0,000		D		
	Persons who respo unless the form dis	nd to the c plays a cui	ollection rrently val	of infor id OMB	mation contained in		·	
(Instr. 4) an		and Expirati			•	Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Date Exercisable	Expiration Date	Title 1	Amount or Number of Shares	Security	(D) or Indirect (I) (Instr. 5)	
Reporting Ow	ners							

reporting Owners

Depositing Owner Name /	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
ALLEN MARK WITT 1155 SHERMAN STREET SUITE 307 DENVER, CO 80203	X				

Signatures

/s/ Mark Allen	10/22/2008
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.