

FILE NOW: FILING FEE AFTER MAY 1 1995

CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF BANKING AND FINANCE
Sandra B. Secretary of Banking and Finance
DIVISION OF CORPORATIONS

DOCUMENT # 743060 (6)
1. Corporation Name
PROFESSIONAL PHOTOGRAPHERS SOCIETY OF NORTH FLORIDA, INC.

Principal Place of Business Mailing Address
1830 KINGS AVE JACKSONVILLE FL 32207 US
1830 KINGS AVE JACKSONVILLE FL 32207 US

2. Principal Place of Business 2a. Mailing Address
21 Same as 1995 26
22 Suite, Apt. #, etc. 27
23 City & State 28
24 Zip 25 Country 29 Zip 30 Country

APPROVED AND FILED
95 MAY 24 11 07 AM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
500001439605
-03/24/95--01109--003
****130.00 ****130.00

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 05/31/1978 3a. Date of Last Report 04/08/1994

4. FEI Number 59-3014334 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
FAVORITE, BETSY R
1830 KINGS AVE
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent
81 Name Same as 1995 Betsy FAVORITE
82 Street Address (P.O. Box Number is Not Acceptable) 1830 Kings Ave
83 Jacksonville FL
84 City Jacksonville FL 85 Zip Code 32207

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Betsy R. Favorite Betsy Favorite 1-25-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	11 TITLE	V <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, B J	12 NAME	D Same BS Brown
STREET ADDRESS	5219 TIMUQUANA RD	13 STREET ADDRESS	Same 5219 Timuquana Rd
CITY - ST - ZIP	JACKSONVILLE FL	14 CITY - ST - ZIP	Jax FL
TITLE	V	21 TITLE	V <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRESCOTT, JAMES J	22 NAME	D Joe Willson
STREET ADDRESS	6020 COLUMBINE DR	23 STREET ADDRESS	5219 Timuquana Rd
CITY - ST - ZIP	JACKSONVILLE FL	24 CITY - ST - ZIP	Jacksonville FL 322
TITLE	P	31 TITLE	P <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FAVORITE, BETSY	32 NAME	D P Betsy FAVORITE
STREET ADDRESS	1830 KINGS AVE.	33 STREET ADDRESS	Same 1830 Kings Ave
CITY - ST - ZIP	JACKSONVILLE FL	34 CITY - ST - ZIP	Jax FL 32207
TITLE	T	41 TITLE	T <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAMPIZ, RAMFIS	42 NAME	D T Ramfis Campiz
STREET ADDRESS	7761 OLD KINGS RD	43 STREET ADDRESS	Same 7761 Old Kings Rd
CITY - ST - ZIP	JACKSONVILLE FL	44 CITY - ST - ZIP	Jax FL
TITLE	S	51 TITLE	S <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIEVT, LISA	52 NAME	D T S Lisa Kievt
STREET ADDRESS	3754 CARMICHAEL AVE	53 STREET ADDRESS	Same 3754 Carmichael Ave
CITY - ST - ZIP	JACKSONVILLE FL	54 CITY - ST - ZIP	Jax FL
TITLE	D	61 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELSEY, SLEETIA	62 NAME	D T Quil Begonia
STREET ADDRESS	12627 SAN JOSE BLVD	63 STREET ADDRESS	760 Arrow Ct
CITY - ST - ZIP	JACKSONVILLE FL	64 CITY - ST - ZIP	Orange Park FL 32073

14. I do hereby certify that the information supplied with this document is truthfully furnished and does not qualify for the exemption stated in Section 110.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made in and out; 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Betsy R. Favorite Betsy R. Favorite 1-26-95 904-399-5799