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FILED
Mar 26 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H60418 (1)

1. Corporation Name
PHOTOGRAPHS BY NANCY, INC.



Principal Place of Business
218 U.S. HWY ONE-SUITE 201
TEQUESTA FL 33469

Mailing Address
218 U.S. HWY ONE-SUITE 201
TEQUESTA FL 33469-2725

2. Principal Place of Business

21 218 U.S. Hwy One, So., Ste 201
Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 26 27 28 29 30

2a. Mailing Address

26 - same
Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified
06/05/1985

3a. Date of Last Report
04/18/1996

4. FEI Number
59-2540000

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

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

9. Name and Address of Current Registered Agent

HAMILTON, NANCY B.
325 RIVERSIDE DR
JUPITER FL 33469

325

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

(Signature type for principal officer of the corporation and officer applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

12.1	NAME	PST HAMILTON, NANCY B.	<input type="checkbox"/> DELETE
12.2	STREET ADDRESS	325 RIVERSIDE DR.	
12.3	CITY - ST - ZIP	JUPITER FL	
12.4	NAME		<input type="checkbox"/> DELETE
12.5	STREET ADDRESS		
12.6	CITY - ST - ZIP		
12.7	NAME		<input type="checkbox"/> DELETE
12.8	STREET ADDRESS		
12.9	CITY - ST - ZIP		
12.10	NAME		<input type="checkbox"/> DELETE
12.11	STREET ADDRESS		
12.12	CITY - ST - ZIP		
12.13	NAME		<input type="checkbox"/> DELETE
12.14	STREET ADDRESS		
12.15	CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	NAME	
13.3	STREET ADDRESS	
13.4	CITY - ST - ZIP	
13.5	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6	NAME	
13.7	STREET ADDRESS	
13.8	CITY - ST - ZIP	
13.9	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10	NAME	
13.11	STREET ADDRESS	
13.12	CITY - ST - ZIP	
13.13	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14	NAME	
13.15	STREET ADDRESS	
13.16	CITY - ST - ZIP	
13.17	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.18	NAME	
13.19	STREET ADDRESS	
13.20	CITY - ST - ZIP	

14. I, the undersigned, certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Nancy B. Hamilton - NANCY B. HAMILTON

1/3/97

(56) 746-1223

CR2E034 (9/96)