

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002033

FILED
Jan 05, 2011
Secretary of State

Entity Name: PROFESSIONAL PHOTOGRAPHERS OF NORTH CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1420 NE 26TH AVE
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 6878
OCALA, FL 34478 US

New Mailing Address:

PO BOX 140803
GAINESVILLE, FL 326140803 US

FEI Number: 59-3249355 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KOONTZ, JACKSON W III
1420 NE 26TH LANE
OCALA, FL 34470 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

OFFICERS AND DIRECTORS:

Title: PD
Name: KOONTZ, JACKSON W III
Address: 1420 NE 26TH LANE
City-St-Zip: Ocala, FL 34470 US

Title: VD
Name: BAILEY, AARON W
Address: 1041 NE 6TH ST
City-St-Zip: GAINESVILLE, FL 32601

Title: VD
Name: NEMETH, CHARLES
Address: 8601 SW 5TH PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: SD
Name: JOHNS, TAMMY
Address: 6690 129TH ROAD
City-St-Zip: LIVE OAK, FL 32060

Title: D
Name: BRILL, SAMUEL
Address: 4302 NW 21ST DRIVE
City-St-Zip: GAINESVILLE, FL 32605

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JACKSON W KOONTZ III

PD

01/05/2011

Electronic Signature of Signing Officer or Director

Date