

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90056 017 ***150.00

DOCUMENT # P01000092384

1. Entity Name

IN HOUSE PICTURES, INC.



Principal Place of Business

416 WESTMINSTER STREET
ORLANDO FL 32803

Mailing Address

416 WESTMINSTER STREET
ORLANDO FL 32803

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3745185

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRYANT, CARLA DELOACH
1201 SOUTH ORLANDO AVENUE
SUITE 350
WINTER PARK FL 32789

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME HOUSE, KEN
STREET ADDRESS 1497 TIMBERCREST DRIVE
CITY-ST-ZIP ORLANDO FL 32738

TITLE D ☐ Delete
NAME SPELTZ, GAIL GRACE
STREET ADDRESS 416 WESTMINSTER STREET
CITY-ST-ZIP ORLANDO FL 32803

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

12. I hereby 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gail G. Speltz Gail G. Speltz

Date

4/13/04 (407) 894-0348

Daytime Phone #

Attachment

14003867
P01000092384

MICHAEL G. SPELTZ, or GIGI SPELTZ 416 Westminster St., 407-894-0348 Orlando, FL 32803		FBI # 59-3745185		63-215/631		\$ 4768	
4113		BAL. FORD		THIS ITEM		BALANCE	
Florida dept. of State		150.00					
One hundred & fifty & 00/100							
SunTrust Bank, Central Florida, N.A. University Boulevard Office Winter Park, FL (407) 299-4788		DEPOSIT		OTHER		BAL. FORD	
#1 House pictures							
0063102152071571571508		4768					
						NOT NEGOTIABLE	