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95 APR 28 PM 1:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **P94000003448 (5)**

1. Corporation Name
VANTAGE POINT PHOTOGRAPHY, INC.

Principal Place of Business Mailing Address
**151 N ORLANDO AVE #203
WINTER PARK FL 32789** **151 N ORLANDO AVE #203
WINTER PARK FL 32789**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
01/07/1994

4. FEI Number Applied For
59-3275817 Not Applicable

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

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

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

2. Principal Place of Business 2a. Mailing Address

21 26

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 27

City & State City & State

23 28

Zip Country Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**ROBINSON, JAMES SR
151 N ORLANDO AVE #203
WINTER PARK FL 32789**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City 85 Zip Code

FL

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 DATE

Signature, typed or printed name of registered agent and title if applicable *NOTE: Registered Agent signature required when registering*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT / TREASURER	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BETTY PHYLLIS ROBINSON	1.2 NAME	
STREET ADDRESS	151 N. ORLANDO AVE #203	1.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK, FL 32789	1.4 CITY - ST - ZIP	
TITLE	VICE - PRESIDENT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES ROGER ROBINSON	2.2 NAME	
STREET ADDRESS	151 N. ORLANDO AVE #203	2.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK, FL 32789	2.4 CITY - ST - ZIP	
TITLE	SECRETARY	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN EDWARD ROBINSON	3.2 NAME	
STREET ADDRESS	151 N ORLANDO AVE #1104	3.3 STREET ADDRESS	
CITY - ST - ZIP	WINTER PARK, FL 32789	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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: *[Signature]* **JOHN E. ROBINSON** **4-24-95** **(407) 644-2045**

Signature and typed or printed name of signing officer or director Date Telephone Number