

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90103 033 ****61.25

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1. Corporation Name

INTERNATIONAL ASSOCIATION OF PANORAMIC PHOTOGRAPHERS, INC.

Principal Place of Business

1385-87 WEST PALMETTO PARK ROAD WEST
BOCA RATON FL 33486

Mailing Address

1385-87 WEST PALMETTO PARK ROAD WEST
BOCA RATON FL 33486



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

01/08/1997

4. FEI Number

65-0771941

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

9. Name and Address of Current Registered Agent

LORBER, ADDIE
1385-87 WEST PALMETTO PARK ROAD WEST
BOCA RATON FL 33486

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME YAKE, FRED
STREET ADDRESS 8855 REDWOOD STREET
CITY-ST-ZIP LAS VEGAS NV 89139
☒ DELETE

TITLE DP
NAME TREMBLAY, DENIS
STREET ADDRESS ST. JEAN SUR RICHHEU
CITY-ST-ZIP QUEBEC, CANADA J3A 1M1
☐ DELETE

TITLE SD
NAME LORBER, ADDIE
STREET ADDRESS 1385-87 WEST PALMETTO PARK ROAD WEST
CITY-ST-ZIP BOCA RATON FL 33486
☐ DELETE

TITLE D
NAME LANDON, WILL
STREET ADDRESS 15913 S.E. 6TH ST
CITY-ST-ZIP BELLEUE WA 98008
☐ DELETE

TITLE D
NAME HYMANS, LIZ
STREET ADDRESS 40 LAGOON ROAD
CITY-ST-ZIP BELEVEDERE CA 94920
☐ DELETE

TITLE D
NAME SEGAL, DOUGLAS
STREET ADDRESS 70 EAST LAKE STREET, SUITE 415
CITY-ST-ZIP CHICAGO IL 60601
☒ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DIRECTOR
1.2 NAME EVERETT J. BROWN
1.3 STREET ADDRESS 376 S.W. Temple
1.4 CITY-ST-ZIP Salt Lake City, UT 84011
☐ Change ☒ Addition

2.1 TITLE Director
2.2 NAME Richard Schneider
2.3 STREET ADDRESS 8301 Myrtle Ave.
2.4 CITY-ST-ZIP Bowie, MD 20715
☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-99 561-393 7101

Date

Daytime Phone #

CR2E037 (11/98)