

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000048378

FILED  
Jan 14, 2008  
Secretary of State

Entity Name: INSIDE - OUT PHOTOGRAPHY, INC.

**Current Principal Place of Business:**

202 ALLEN AVENUE  
EVERGLADES CITY, FL 34139 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 66  
EVERGLADES CITY, FL 34139 US

**New Mailing Address:**

FEI Number: 65-0670921

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ARWOOD, RALPH  
1717 GULF SHORE BLVD. NORTH  
STE 501  
NAPLES, FL 34102 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ARWOOD, RALPH  
Address: 1717 GULF SHORE BLVD. NORTH  
City-St-Zip: NAPLES, FL 34102

Title: D ( ) Delete  
Name: SABERTSCHNIG, GISELA  
Address: 1717 GULF SHORE BLVD. NORTH  
City-St-Zip: NAPLES, FL 34102

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RALPH ARWOOD

CEO

01/14/2008

Electronic Signature of Signing Officer or Director

Date