

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000003272

**Entity Name:** ROSE DAY PHOTOGRAPHY, INC.

**Current Principal Place of Business:**

4939 SW 99TH PLACE  
OCALA, FL 34476

**Current Mailing Address:**

4939 SW 99TH PLACE  
OCALA, FL 34476 US

**FEI Number:** 27-1939361

**Certificate of Status Desired:** No

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

DAY, AMANDA R  
4939 SW 99TH PLACE  
OCALA, FL 34476 US

*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

**Officer/Director Detail :**

Title            D  
Name            DAY, AMANDA R  
Address        4939 SW 99TH PLACE  
City-State-Zip: Ocala FL 34476

Title            D  
Name            DAY, MICHAEL J  
Address        4939 SW 99TH PLACE  
City-State-Zip: Ocala FL 34476

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

**SIGNATURE:** AMANDA DAY

**DIRECTOR**

**04/25/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date