FILED
Sep 25, 2002 8:00 am
Secretary of State
07-24-2002 90179 001 ****61.25
07-24-2002 90179 002 *****8.75

NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 743060

1. Entity Name
Professional Photographers Society of North Florida

DO NOT WRITE IN THIS SPACE

[redacted]

42979

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
RAMFIS PHOTOGRAPHIC.
Suite, Apt. #, etc.
City & State: JACKSONVILLE FL. 32223
Zip: 32223 Country:

3. Mailing Address
2880 MANDARIN MEADOWS DR N
Suite, Apt. #, etc.
City & State:
Zip: Country:

4. FEI Number: 59-3014334 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: michael Ballinger
Street Address (P.O. Box Number is Not Acceptable): 1633 San marco Blvd #6
City: Jacksonville Fl. FL Zip Code: 32207

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.

SIGNATURE: michael Ballinger michael Ballinger 3/Sept/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25 Initial or Amended UBR

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE: President NAME: Mike Ballinger STREET ADDRESS: 1633 San marco Blvd #6 CITY-ST-ZIP: Jacksonville, Fl. 32207	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: Vice President NAME: Susan michal STREET ADDRESS: 10418 Dockside Dr. W. CITY-ST-ZIP: Jacksonville, Fl 32257	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: Second Vice Presendent NAME: Kristin Jivan STREET ADDRESS: 9917 BayView Ave CITY-ST-ZIP: Jacksonville, Fl. 32208	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: Board member NAME: Gloria Daly STREET ADDRESS: P.O. Box 26507 CITY-ST-ZIP: Jacksonville Fl. 32226	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: Board member NAME: Brenda Estes STREET ADDRESS: 552 Edward Rutledge St. CITY-ST-ZIP: Orange Park Fl. 32073	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: Board member NAME: Deborah Brough STREET ADDRESS: 12620 Aladin Rd. CITY-ST-ZIP: Jacksonville, Fl. 32223	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:

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CR2E037B (12/01)

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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael Ballinger 18/JULY/02 904-398-0802
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #