2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #743062



FILED Apr 27, 2005 8:00 am Secretary of State 04-27-2005 90288 012 ****61.25

| NORTHWEST SECTION FLORIDA PROFESSIONAL PHOTOGRAPHERS, INC. | | | | | | 0.27.2005 | | | |
|---|--|--|---|--|--|--|--|--|--|
| Principal Place 218 NORTH S PENSACOLA, | SPRING STREET | Mailing Address 218 NORTH SPRING STR PENSACOLA, FL 32501 | REET | |) (SAIII IZAN E | :: a aint a aine a mil a agu | TI PISTI PISTS SIS | TI 21811 BY217 BY | |
| 2. Principal P | lace of Business | 3. Mailing Address | | | | | | | |
| Suite, Apt. #. etc. S | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 04242005 | Chg-NP | CR2E03 | 37 (10/03) | |
| City & State C | | City & State | City & State | | | 171 | | _ | oplied For ot Applicable |
| Zip | Country | Zip | Country | | 5. Certificate of | of Status Desired | | \$8.75 Add Fee Require | |
| | 6. Name and Address of Current F | Registered Agent | Name | | 7. Name and / | Address of New | Registered / | Agent | |
| MALINOWSKI, RAY | | | | | | | | | |
| 218 N. SPI | RING STREET DLA, FL 32501 | | Street A | Address (F | O. Box Number | r is Not Acceptab | le) | | |
| | | | City | | | | FL | Zip Coo | ie |
| 9 Thompson | named paths as both this statement for | the aurage of changing its | aciatarad affica a | | ad accest or both | is the Ctate of F | | fomiliar with | and annual |
| 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. I am familiar with, and accept the obligations of registered agent. | | | | | | | | | |
| | | | | | | | | | |
| SIGNATURE | | | | | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2005 | | | 9. Election Campaign Financing Trust Fund Contribution. | | \$5.00 May Be Added to Fees Make check payable to Florida Department of State | | | | |
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| 10. | | Trust Fund Co | | | Added to Fees | | rida Depar | tment of S | tate |
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: headone Al Bowne Theodore H. Bowne SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Cell 850 572-5723 850 479-823

nonthwestAFIACHHILAND Professional Photographers. INC. 4/25/05

Brown, Patsy 17 S. Palafox Ste. 110 Pensacoki, 71 32502 4006788°