## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT #743062**



**FILED** May 02, 2008 8:00 am Secretary of State

NORTHWEST SECTION FLORIDA PROFESSIONAL PHOTOGRAPHERS, INC.							ţ	05-02-200	8 90170 00	01 ****(	61.25	
218 NORTH SPRING STREET 218		218 N	ailing Address 18 NORTH SPRING STREET ENSACOLA, FL 32501			1 F <b>3 6</b> 171 1 <b>0 6</b> 12 <b>6</b> 17	888 IIIH 88  B 8  II 6	J1 6(2)) 6(2) (88)	RIBH GIRN BKB	[ <b>3] [] ([]</b>		
2. Principal P	Place of Busin	ness - No P.O. Box #	3. Mailin	g Address								
Suite, Apt. #, etc. Su			Suite	uite, Apt. #, etc.			04272008	Chg-NP	CR2E037	(12/06)		
City & Stat	te			S State			4. FEI Number 59-2946	171			oplied For ot Applicable	
Zip	Zip Country Zi		Zip	· · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired Fee			8.75 Additional se Required		
	6. Name	and Address of Curren	t Registered	Agent	Name	7. Name and Address of New Registered Agent						
MALINOWSKI, RAY 218 N. SPRING STREET PENSACOLA, FL 32501						Street Address (P.O. Box Number is Not Acceptable)						
					City				FL	Zip Code	9	
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  Signature, typed or printed name of registered agent and bite 4 applicable. (NOTE: Registered Agent signature required when reinstating)  DATE												
	Signature, typed	or printed name or registered eigen	nt and soe a applica	ible. (NOTE: F	Registered Agent signet	ure required	when reinstating)		DATE			
	Filing Fe	ee is \$61.25 May 1, 2008	a and the a applica	9. Election Camp Trust Fund Cor	aign Financing	ure required	\$5.00 May Be Added to Fees	3	Make check prida Departn		•	
10,	Filing Fe	e is \$61.25		9. Election Camp Trust Fund Cor	aign Financing		\$5.00 May Be	Flo	Make check portida Departm	CTORS IN	tate	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, K	e is \$61.25 flay 1, 2008	DIRECTORS	9. Election Camp	aign Financing ntribution.	P Armo 607 L	\$5.00 May Be Added to Fees	Fig IGES TO OFFIC	Make check portida Departm	nent of Si	tate	
TITLE NAME STREET ADDRESS	D WHITE, K 507 CHIN FORT WA VD ARMOR, 607 LLOY	OFFICERS AND D  CAREN SUMNER LAS COVE, UNIT D ALTON BEACH, FL 32	DIRECTORS	9. Election Camp Trust Fund Cor	paign Financing ntribution.  11. TITLE NAME STREET ADDRESS	P Armo 607 L Fort V V/D Holly,	\$5.00 May Be Added to Fees ADDITIONS/CHAM or, Bob loyd St.	FL 32547	Make check prida Departm ERS AND DIRE	CTORS IN	tate	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D WHITE, K 507 CHIN FORT WA VD ARMOR, 607 LLOY FORT WA S WILHOUR 108 MIDE	OFFICERS AND D  CAREN SUMNER LAS COVE, UNIT D ALTON BEACH, FL 32 BOB OD ST. ALTON BEACH, FL 32	2547	9. Election Camp Trust Fund Cor	DAIGN Financing Intribution.  11. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	P Armo 607 L Fort V V/D Holly, 625 M Fort V S Cantw PMB 2 40 Wes	\$5.00 May Be Added to Fees ADDITIONS/CHAN or, Bob loyd St. Walton Beach, Janeene fanchester Rd. Walton Beach, ell, Renee	FL 32547	Make check prida Departm	CTORS IN	tate I 10 Addition	
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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** 

4-28-08

(850) 957-1636

ATTACHMENT 40094950

#7743062

Attachment to section 11 for additional Directors for the Northwest Section Florida Professional Photographers, Inc.

11.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Catanese, Cathy 10 Southwind Ct. Niceville, FL 32578	<b>⊠</b> Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Carter, Tom 5649 Sunflower Ave. Milton, FL 32570	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tomchay, DJ PMB 203 40 West Nine Mile Rd #2 Pensacola, FL 32534	[⊠] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition