

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743062

FILED
Apr 20, 2012
Secretary of State

Entity Name: NORTHWEST SECTION FLORIDA PROFESSIONAL PHOTOGRAPHERS, INC.

Current Principal Place of Business:

218 NORTH SPRING STREET
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

218 NORTH SPRING STREET
PENSACOLA, FL 32501

New Mailing Address:

FEI Number: 59-2946171

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALINOWSKI, RAY
218 N. SPRING STREET
PENSACOLA, FL 32501 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

OFFICERS AND DIRECTORS:

Title: P
Name: CATANESE, CATHY
Address: 205 WINDSONG COURT
City-St-Zip: NICEVILLE, FL 32578

Title: VD
Name: WARRINER, TOM
Address: 222 SKYLINE CIRCLE
City-St-Zip: CRESTVIEW, FL 32539

Title: S
Name: SCHAEFER, RHONDA
Address: 205 WINDSONG COURT
City-St-Zip: NICEVILLE, FL 32578

Title: T
Name: NATION, PHILIP
Address: 9568 MUNSON HWY
City-St-Zip: MILTON, FL 32570

Title: D
Name: CARTER, TOM
Address: 5649 SUNFLOWER AVENUE
City-St-Zip: MILTON, FL 32570

Title: D
Name: WOLF, NORMAN
Address: 1269 WHITEWOOD WAY
City-St-Zip: NICEVILLE, FL 32578

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

SIGNATURE: PHILIP NATION

T

04/20/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date