

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747597

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: FLORIDA PROFESSIONAL PHOTOGRAPHERS, INC.

## Current Principal Place of Business:

13424 WHITE CYPRESS RD  
ASTATULA, FL 34705

## New Principal Place of Business:

## Current Mailing Address:

13424 WHITE CYPRESS RD  
ASTATULA, FL 34705

## New Mailing Address:

FEI Number: 59-1172038

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CROWNOVER, TERI  
13424 WHITE CYPRESS RD  
ASTATULA, FL 34705 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: ED ( ) Delete  
Name: CROWNOVER, TERI  
Address: 13424 WHITE CYPRESS RD.  
City-St-Zip: ASTATULA, FL 34705

Title: P ( ) Delete  
Name: KIEF, KIRK  
Address: 118 SAND LAKE ROAD  
City-St-Zip: INTERLACHEN, FL 32148

Title: VP ( ) Delete  
Name: NOCERA, CHERILYN M  
Address: 419 SANTA BARBARA BLVD.  
City-St-Zip: CAPE CORAL, FL 33911

Title: ST ( ) Delete  
Name: ALCORN, DEBBIE  
Address: 4243 TROUT DR ST  
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: PP ( ) Delete  
Name: GORDON, AL  
Address: 4301 32ND ST W #B-18  
City-St-Zip: BRADENTON, FL 342052748

Title: D ( ) Delete  
Name: CROUCH, SUE  
Address: 585 JACKSON AVE  
City-St-Zip: SATELLITE BEACH, FL 32937

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P (X) Change ( ) Addition  
Name: NOCERA, CHERILYN M  
Address: 419 SANTA BARBARA BLVD.  
City-St-Zip: CAPE CORAL, FL 33911

Title: VP (X) Change ( ) Addition  
Name: ALCORN, DEBBIE  
Address: 4243 TROUT DR SE  
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: ST (X) Change ( ) Addition  
Name: CROUCH, SUE  
Address: 585 JACKSON AVE  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: PP (X) Change ( ) Addition  
Name: KIEF, KIRK  
Address: 118 SAND LAKE RD  
City-St-Zip: INTERLACHEN, FL 32148

Title: D (X) Change ( ) Addition  
Name: DANA, LUNDEN  
Address: 8713 ELMDALE PLACE  
City-St-Zip: TAMPA, FL 33637

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: TERI CROWNOVER

ED

01/23/2009

Electronic Signature of Signing Officer or Director

Date