

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K12978

FILED
Apr 27, 2009
Secretary of State

Entity Name: PHOTO SHOPPER, INCORPORATED

Current Principal Place of Business:

2905 E. BUSINESS HWY. 98
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

2905 E. BUSINESS HWY. 98
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-2866092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HILLIER, RHONDA B.
139 ARLINGTON DR
PANAMA CITY, FL 32404 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HILLIER, RHONDA B
Address: 139 ARLINGTON DR
City-St-Zip: PANAMA CITY, FL 32404

Title: VPS () Delete
Name: BROWN, STEPHEN
Address: 636 SHORIY KEMP RD
City-St-Zip: WEWAHITCHKA, FL 32465

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPS (X) Change () Addition
Name: BROWN, STEPHEN
Address: 636 SHORTY KEMP RD
City-St-Zip: WEWAHITCHKA, FL 32465

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

SIGNATURE: RHONDA B. HILLIER

RA

04/27/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date