

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000057560

Entity Name: PHOTO-FILM LLC

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

9424 SW 1ST PLACE
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

9424 SW 1ST PLACE
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 20-2969985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLSON, JOSEPH B
9424 SE 1ST PLACE
GAINESVILLE, FL 32607 US

Name and Address of New Registered Agent:

NICHOLSON, JOSEPH B
9424 SW 1ST PLACE
GAINESVILLE, FL 32607 US

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:

04/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DUENSING, GEORGE
Address: 11703 NE 4TH AVENUE
City-St-Zip: GAINESVILLE, FL 32641

Title: MGR () Delete
Name: VITTORIO, VINCENT
Address: 2639 CEDAR DRIVE
City-St-Zip: LAWRENCEVILLE, GA 30043

Title: MGR (X) Delete
Name: DUENSING, TRACEY
Address: 11703 NE 4TH AVENUE
City-St-Zip: GAINESVILLE, FL 32641

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: DUENSING, TRACEY
Address: 11703 NE 4TH AVE
City-St-Zip: GAINESVILLE, FL 32641

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

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSEPH NICHOLSON

RA

04/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date