2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093943

Entity Name: PAULA KENNEDY PHOTOGRAPHY, LLC

FILED Jan 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

249 HALLCREST TERRACE 610 CHARLOTTE STREET PORT CHARLOTTE, FL 33954 US PUNTA GORDA, FL 33050 US

Current Mailing Address: New Mailing Address:

P.O. BOX 496604 24123 PEACHLAND BLVD. C-4 #315 PORT CHARLOTTE, FL 33949 US C-4 # 315

PORT CHARLOTTE, FL 33950

FEI Number: 26-0894202 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KENNEDY, PAULA 249 HALLĆREST TERRACE PORT CHARLOTTE, FL 33954 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:

Date

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Delete (X) Change () Addition

KENNEDY, PAULA KENNEDY, PAULA Name: Name: P. O. BOX 496604 Address: 249 HALLCREST TERRACE Address: City-St-Zip: PORT CHARLOTTE, FL 33949 US City-St-Zip: PORT CHARLOTTE, FL 33954 US

(X) Change () Addition Title: MGRM () Delete Title: MGRM

Name: KENNEDY, DONALD E Name: KENNEDY, DONALD E Address: P. O. BOX 496604 Address: 249 HALLCREST TERRACE City-St-Zip: PORT CHARLOTTE, FL 33949 US City-St-Zip: PORT CHARLOTTE, FL 33954 US

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: PAULA KENNEDY MANA 01/16/2009