

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000103695

FILED  
Aug 19, 2009  
Secretary of State

Entity Name: SNAP PHOTOGRAPHY LLC

**Current Principal Place of Business:**

723 HERMAN AVENUE  
ORLANDO, FL 32803 US

**New Principal Place of Business:**

**Current Mailing Address:**

723 HERMAN AVENUE  
ORLANDO, FL 32803 US

**New Mailing Address:**

FEI Number: 26-3676099      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A-100  
TAMPA, FL 33612 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SMITH, CHRISTOPHER P  
Address: 723 HERMAN AVENUE  
City-St-Zip: ORLANDO, FL 32803 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: P (X) Change ( ) Addition  
Name: SMITH, CHRISTOPHER P  
Address: 723 HERMAN AVENUE  
City-St-Zip: ORLANDO, FL 32803 US

Title: VP ( ) Change (X) Addition  
Name: SMITH, KIMBERLY J  
Address: 723 HERMAN AVENUE  
City-St-Zip: ORLANDO, FL 32803 US

Title: S ( ) Change (X) Addition  
Name: SMITH-MCCARTNEY, REBECCA A  
Address: 4233 ORTISI DRIVE  
City-St-Zip: ORLANDO, FL 32822 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: CHRISTOPHER SMITH

P

08/19/2009

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

To whom it may concern.

**LO800010369**

I Can't Seem to find a number to contact you regarding this matter.

I Sent this payment in when it was due. I was very Shocked to See the Card in the mail that Stated Our company was being dissolved.

I'm not Sure if the payment didn't get to you or what happened.

I am Sending another payment to resolve this matter. I am also going to try to figure out what happened with the first payment.

Thank you for taking the time to review this.

Kimberly Smith  
407 496.4333