


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 17, 2004 8:00 am
Secretary of State


02-17-2004 90193 016 ****50.00

| | |
|--|---|
| DOCUMENT # M01000000138 |  |
| 1. Entity Name PHOTOTECH LLC | |

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| Principal Place of Business 1801 RICHARDS RD. TOLEDO OH 43697 | Mailing Address P.O. BOX 931 TOLEDO OH 43697 |
|---|--|

| | |
|---|---------------------|
| 2. Principal Place of Business 1480 Ford Street | 3. Mailing Address |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |

| | |
|-------------------------------------|-----------------------|
| City & State Maumee, OHIO | City & State |
| Zip 43537 | Country USA |

| | |
|---|--|
|  | |
| MOORE | CR2E083 (11/03) |
| 4. FEI Number 34-1752289 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

| | |
|--|--|
| 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 | |
|--|--|

| | |
|--|-------------|
| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | FL Zip Code |

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| | |
|--|--|
| FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004 | |
|--|--|

| 9. MANAGING MEMBERS / MANAGERS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P BISHOP, PAUL J 1801 RICHARDS ROAD TOLEDO OH 43697 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V BARNARD, NEAL B 1801 RICHARDS ROAD TOLEDO OH 43697 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T MULAWA, TERESA 1801 RICHARDS ROAD TOLEDO OH 43697 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S MARTH, LETITIA D 1801 RICHARDS ROAD TOLEDO OH 43697 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR HUDSON, DAVID A 3404 NORTH DUKE STREET DURHAM NC 27704 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR LUTTANS, KIM 1209 ORANGE STREET WILMINGTON DE 19801 |

| 10. ADDITIONS / CHANGES | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4500 Dorr St Toledo OH 43615 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Assistant Treasurer Wyndolyn Snell 1480 Ford St Maumee, OH 43537 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1480 Ford St Maumee, OH 43537 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1480 Ford St Maumee, OH 43537 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Manager Laurie A Braun 3404 North Duke Street Durham NC 27704 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Manager Kenneth J. Ora 1209 Orange Street Wilmington, DE 19801 |

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 149.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Wyndolyn Snell 2/5/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Attachment

24011535

M01000000138

Directors, Officers Report

PhotoTech LLC

Tuesday, February 03, 2004

OFFICERS

Paul J Bishop

President

Primary Address: 4500 Dorr Street
Toledo, Ohio 43615 USA

Andrew P Paszek

Vice President

Primary Address: 1480 Ford Steet
Toledo, Ohio 43537 USA

Dean L Wilson

Vice President

Primary Address: 1480 Ford Steet
Maumee, Ohio 43537 USA

Teresa Mulawa

Vice President and Treasurer

Primary Address: 1480 Ford Steet
Toledo, Ohio 43537 USA

Letitia D Marth

Secretary

Primary Address: 1480 Ford Steet
Toledo, Ohio 43537 USA

Christopher J Czarka

Assistant Treasurer

Primary Address: 4500 Dorr Street
Toledo, Ohio 43607

Wyndolyn L Snell

Assistant Treasurer

Primary Address: 1480 Ford Steet
Toledo, Ohio 43537 USA

MANAGERS

Paul J Bishop

Manager

Primary Address: 4500 Dorr Street
Toledo, Ohio 43615 USA

Laurie A Braun

Manager

Primary Address: 3404 North Duke Steet
Durham, North Carolina 27704 USA

Kenneth J Uva

Manager

Primary Address: The Corporate Trust Company
Corporation Trust Center
1209 Orange Street
Wilmington, DE 19801 USA