

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 24, 2009**  
**Secretary of State**

DOCUMENT# N07000011335

**Entity Name:** PORTRAIT AND FIGURE PAINTERS SOCIETY OF SW FLORIDA, INC.**Current Principal Place of Business:**17545 BUTLER ROAD  
S FORT MYERS, FL 33967 US**New Principal Place of Business:****Current Mailing Address:**17545 BUTLER ROAD  
S FORT MYERS, FL 33967 US**New Mailing Address:****FEI Number:** 26-1473364**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**GOLOB, JAMIE  
4508 SW SANTA BARBARA PLACE  
CAPE CORAL, FL 33914 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

**OFFICERS AND DIRECTORS:****Title:** F, P ( ) Delete  
**Name:** REUTER, RENATE M F, P  
**Address:** 17545 BUTLER ROAD  
**City-St-Zip:** S FORT MYERS, FL 33967 US**Title:** SVP ( ) Delete  
**Name:** JAMIE, GOLOB SVP  
**Address:** 4508 SW SANTA BARBARA PLACE  
**City-St-Zip:** CAPE CORAL, FL 33914**Title:** VP ( ) Delete  
**Name:** KENNEY, JOYCE VP  
**Address:** 1660 PINE VALLEY DRIVE, UNIT 302  
**City-St-Zip:** FORT MYERS, FL 33907 US**Title:** T ( ) Delete  
**Name:** MARJORIE, EWELL A T  
**Address:** 3316 22ND PLACE  
**City-St-Zip:** CAPE CORAL, FL 33904 US**Title:** A ( ) Delete  
**Name:** GILLESPIE, RICHARD A  
**Address:** 1000 KINGS HWY. UNIT 448  
**City-St-Zip:** PORT CHARLOTTE, FL 33960 US**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RENATE M REUTER

FP

05/24/2009

Electronic Signature of Signing Officer or Director

Date