


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 02, 2008 08:00 AM**  
**Secretary of State**


**DOCUMENT # N16115**

1. Entity Name  
 FLORIDA INDEPENDENT FILM & VIDEO, INC.



Principal Place of Business PMB 163 2457 A S HIWASSEE RD ORLANDO, FL 32835	Mailing Address PMB 163 2457 A S HIWASSEE RD ORLANDO, FL 32835
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**DO NOT WRITE IN THIS SPACE**



03302008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2708954	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SUCHY, BILL  
 5367 ABELIA DRIVE  
 ORLANDO, FL 32819

**DO NOT WRITE IN THIS SPACE**

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: WILLIAM SUCHY *William Suchy* DATE: 3/28/08

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25**  
**Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SUCHY, BILL 5367 ABELIA DRIVE ORLANDO, FL 32819
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST SUCHY, JOYCE 5367 ABELIA DRIVE ORLANDO, FL 32819
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 04/14/08-80065-016 70.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM SUCHY *William Suchy* DATE: 3/28/08 DAYTIME PHONE #: 407-294-3456

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR