

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27097

FILED
Apr 26, 2009
Secretary of State

Entity Name: ATLANTIC PROFESSIONAL PHOTOGRAPHERS ASSOCIATION, INC.

Current Principal Place of Business:

237 TERRENCE AVE
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

237 TERRENCE AVE
MELBOURNE, FL 32935 US

New Mailing Address:

FEI Number: 59-2961711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEITZ, DAWN C
237 TERRENCE AVE
MELBOURNE, FL 32935 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: P () Delete
Name: SONNON, DERICA
Address: 585 JACKSON AVE
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: VP () Delete
Name: GORMAN, CASEY
Address: 201 S. CHRISTMAS HILL RD
City-St-Zip: TITUSVILLE, FL 32796 US

Title: S () Delete
Name: NICHOLS, NICK
Address: 593 COMANCHE
City-St-Zip: MELBOURNE, FL 32935

Title: T () Delete
Name: RHODEN, STAN
Address: 1894 SARNO RD
City-St-Zip: MELBOURNE, FL 32935 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BONSALL, VIVIANNA
Address: 4156 FISHERMANS PL
City-St-Zip: COCOA, FL 32926 US

Title: VP (X) Change () Addition
Name: WICKER, ROBERT
Address: 2825 BUSINESS CENTER BLVD SUITE D6
City-St-Zip: MELBOURNE, FL 32940 US

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: DAWN DEITZ

ASST

04/26/2009

Electronic Signature of Signing Officer or Director

Date