

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33791

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** PALM BEACH PHOTOGRAPHIC CENTRE, INC.

**Current Principal Place of Business:**

55 N.E. 2ND AVE  
DELRAY BEACH, FL 33444 US

**New Principal Place of Business:**

415 CLEMATIS ST  
WEST PALM BEACH, FL 33401 US

**Current Mailing Address:**

55 N.E. 2ND AVE  
DELRAY BEACH, FL 33444 US

**New Mailing Address:**

415 CLEMATIS ST  
WEST PALM BEACH, FL 33401 US

**FEI Number:** 59-2801420

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEJAME, FATIMA  
55 N.E. 2ND AVE.  
DELRAY BEACH, FL 33444 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: DP ( ) Delete  
Name: NEJAME, FATIMA  
Address: 6525 SOUTH FLAGLER DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: DV ( ) Delete  
Name: BUZA, RAY  
Address: 215 SOUTH OLIVE AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DT ( ) Delete  
Name: BROWN, CHRISTOPHER J  
Address: 218 N.W. 9TH STREET  
City-St-Zip: DELRAY BEACH, FL 33444

Title: DS ( ) Delete  
Name: ROBERTS, CAROL  
Address: 6708 PAMELA LANE  
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D ( ) Delete  
Name: GOLDBERG, JOAN  
Address: 12215 174 CT N  
City-St-Zip: JUPITER, FL 33478

Title: D ( ) Delete  
Name: DEITS, KATIE  
Address: 2751 SOUTH DIXIE HWY.  
City-St-Zip: WEST PALM BEACH, FL 33416

**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:

Title: D (X) Change ( ) Addition  
Name: KOENIGSBERG, JAY  
Address: 1200 BRICKELL AVENUE SUITE 1900  
City-St-Zip: MIAMI, FL 33131

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: FATIMA NEJAME

DP

04/14/2009

Electronic Signature of Signing Officer or Director

Date