

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N94000000547

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** PROFESSIONAL PHOTOGRAPHERS OF SOUTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

28692 PIENZA CT  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

17330 STEPPING STONE DRIVE  
FORT MYERS, FL 33967

**Current Mailing Address:**

28692 PIENZA CT  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

17330 STEPPING STONE DRIVE  
FORT MYERS, FL 33967

**FEI Number:** 65-0457199

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JODICE, JEFF  
4020 SW 2ND 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: DP  
Name: SPRATLIN, BARBARA  
Address: 17910 SAWMILL LANE  
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: DVP  
Name: PARISH, RICHARD  
Address: 1010 SE 18TH AVE  
City-St-Zip: CAPE CORAL, FL 33990

Title: DT  
Name: ANTONELLI, SHARON  
Address: 17330 STEPPING STONE DRIVE  
City-St-Zip: FORT MYERS, FL 33967

Title: DS  
Name: DIPIERO, MEGAN  
Address: 855 RUE LABEAU CIRCLE  
City-St-Zip: FORT MYERS, F: 33193

I hereby 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 all other like empowered.

SIGNATURE: SHARON ANTONELLI

DT

01/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date