## 2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000006067

TI FILED
Dec 22, 2008
Secretary of State

Entity Name: BAY PROFESSIONAL PHOTOGRAPHERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2345 BEE RIDGE RD 5220 MCINTOSH RD

SUITE 6B #

SARASOTA, FL 34239 US SARASOTA, FL 34233 US

Current Mailing Address: New Mailing Address:

2345 BEE RIDGE RD 5220 MCINTOSH RD

SUITE 6B #3 SARASOTA, FL 34239 US SARASOTA, FL 34233 US

FEI Number: 59-3289358 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MILLARD, KEITH
2345 BEE RIDGE RD

MILLARD, KEITH
5220 MCINTOSH RD

SUITE 6B #3 SARASOTA, FL 34239 US SARASOTA, FL 34233 US

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: KEITH A MILLARD 12/22/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 JANICK, DAWN
 Name:
 MILLARD, KEITH

 Address:
 466 CREWS CT
 Address:
 5220 MCINTOSH RD #3

 City-St-Zip:
 PT CHARLOTTE, FL 33952
 City-St-Zip:
 SARASOTA, FL 34233

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BEECHER, BRIAN
 Name:

 Address:
 4367 INDEPENDENCE CT
 Address:

 City-St-Zip:
 SARASOTA, FL 34234
 City-St-Zip:

Title: SEC ( ) Delete Title: SEC (X) Change ( ) Addition

 Name:
 KENNEDY, PAULA
 Name:
 BERNS, ARNOLD

 Address:
 PO BOX 496604
 Address:
 PO BOX 20589

 City-St-Zip:
 PORT CHARLOTTE, FL 33949
 City-St-Zip:
 SARASOTA, FL 34276

Title: TREA () Delete Title: TREA (X) Change () Addition

Name:MILLARD, KEITHName:QUARMBY, SUSANAddress:2345 BEE RIDGE RD SUITE 6BAddress:2250 BERN CREEK LOOPCity-St-Zip:SARASOTA, FL 34239City-St-Zip:SARASOTA, FL 34240

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: KEITH A MILLARD PRES 12/22/2008