2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002033

FILED Mar 08, 2010 Secretary of State

Entity Name: PROFESSIONAL PHOTOGRAPHERS OF NORTH CENTRAL FLORIDA, INC.

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

2145 NW 147TH ST 1420 NE 26TH AVE NEWBERRY, FL 32669 US 0CALA, FL 34470 US

Current Mailing Address: New Mailing Address:

2145 NW 147TH ST PO BOX 6878

NEWBERRY, FL 32669 US OCALA, FL 34478 US

FEI Number: 59-3249355 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:

RADLINSKI, KRYSTAL
2145 NW 147TH ST
NEWBERRY, FL 32669 US

KOONTZ, JACKSON W III
1420 NE 26TH LANE
OCALA, FL 34470 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: JACKSON KOONTZ 03/08/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

 Name:
 KOONTZ, JACKSON W III

 Address:
 1420 NE 26TH LANE

 City-St-Zip:
 OCALA, FL 34470 US

Title: VD

 Name:
 BAILEY, AARON W

 Address:
 1041 NE 6TH ST

 City-St-Zip:
 GAINESVILLE, FL 32601

Title: VD

 Name:
 PEREZ, MARIO

 Address:
 531 NE 7TH TERR

 City-St-Zip:
 GAINESVILLE, FL 32601

Title: SD

 Name:
 JOHNS, TAMMY

 Address:
 6690 129TH ROAD

 City-St-Zip:
 LIVE OAK, FL 32060

Title:

 Name:
 BRILL, SAMUEL

 Address:
 4302 NW 21ST DRIVE

 City-St-Zip:
 GAINESVILLE, FL 32605

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: JACKSON KOONTZ PD 03/08/2010