

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 8:00 am
Secretary of State

01-12-2004 90020 024 ***150.00

DOCUMENT # P00000027497

1. Entity Name
JEAN RAFTERY PHOTOS, INC.



Principal Place of Business
5820 SOUTHWEST 164TH TERRACE
FORT LAUDERDALE, FL 33331

Mailing Address
5820 SOUTHWEST 164TH TERRACE
FORT LAUDERDALE, FL 33331

24001420



2. Principal Place of Business
731 North Ridgewood Ave
Suite, Apt. #, etc.

3. Mailing Address
731 North Ridgewood Ave
Suite, Apt. #, etc.

01082004 Chg-P CR2E034 (10/03)

City & State
DELAND FL
Zip 32720 Country USA

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DELAND FL
Zip 32720 Country USA

4. FEI Number
65-0994891
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUSSELL, JEAN R
5820 SW 164TH TER
FORT LAUDERDALE, FL 33331

Name
Street Address (P.O. Box Number is Not Acceptable)
731 North Ridgewood Ave
City DELAND FL Zip Code 32720

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Jean R. Russell
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

1/8/04
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME RUSSELL, JEAN R
STREET ADDRESS 5820 SOUTHWEST 164TH TERRACE
CITY-ST-ZIP FORT LAUDERDALE, FL 33331

TITLE ☒ Change ☐ Addition
NAME 731 North Ridgewood Ave
STREET ADDRESS DELAND, FL 32720
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME RUSSELL, THOMAS A
STREET ADDRESS 5820 SOUTHWEST 164TH TERRACE
CITY-ST-ZIP FORT LAUDERDALE, FL 33331

TITLE ☒ Change ☐ Addition
NAME 731 North Ridgewood Ave
STREET ADDRESS DELAND, FL 32720
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

SIGNATURE: *Jean R. Russell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/4/08
Date

386-943-8841
Daytime Phone #