

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000031811

FILED
Jan 17, 2006
Secretary of State

Entity Name: THE PICTURE FACTORY OF BOYNTON BEACH, INC.

Current Principal Place of Business:

1510 SW 8TH ST
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

2320 VANDERBILT BEACH RD
NAPLES, FL 34109

New Mailing Address:

FEI Number: 59-3642686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRISON, DAVID N ESQ
MORRISON & CONROY, P.A.
3838 TAMiami TRL NORTH, STE 402
NAPLES, FL 34103 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: CISKIE, ROGER D
Address: 675 WEST AVE
City-St-Zip: NAPLES, FL 34108

Title: P () Delete
Name: CISKIE, STEVE
Address: 333 SEVERIN RD SE
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: T () Delete
Name: MURROW, SKIP
Address: 7508 SAN MIGUEL WAY
City-St-Zip: NAPLES, FL 34109

Title: () Delete
Name:
Address:
City-St-Zip:

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: CEO () Change (X) Addition
Name: ROSSLER, JOHN
Address: 2320 VANDERBILT BCH RD
City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SKIP MURROW

CFOT

01/17/2006

Electronic Signature of Signing Officer or Director

Date