

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000013770

**FILED**  
**Mar 19, 2008**  
**Secretary of State**

**Entity Name:** IMPACT U.K. PHOTOGRAPHY, INC.

**Current Principal Place of Business:**

12967 IONA RD.  
FORT MYERS, FL 33908

**New Principal Place of Business:**

1619 PERIWINKLE WAY  
UNIT 104  
SANIBEL, FL 33957

**Current Mailing Address:**

12967 IONA RD.  
FORT MYERS, FL 33908

**New Mailing Address:**

PO BOX 1538  
SANIBEL, FL 33957

**FEI Number:** 80-0030577

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOUWERS, THOMAS R  
1619 PERI WINKLE WAY  
SUITE 102  
SANIBEL, FL 33957 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: PD ( ) Delete  
Name: ADAMS, NICHOLAS J  
Address: 12967 IONA RD.  
City-St-Zip: FT MYERS, FL 33908

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** NICHOLAS JAMES ADAMS

PD

03/19/2008

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

\_\_\_\_\_  
Date