2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 27, 2008
Secretary of State

DOCUMENT# P02000078487

Entity Name: PHOTOGRAPHY BY MICHELLE A M WILSON, INC.

Current Principal Place of Business:

4623 RIVER OVERLOOK DRIVE
VALRICO, FL 33594

New Principal Place of Business:

10326 PALERMO CIRCLE
#104
TAMPA, FL 33619

Current Mailing Address:

4623 RIVER OVERLOOK DRIVE
VALRICO, FL 33594

New Mailing Address:

10326 PALERMO CIRCLE
#104
TAMPA, FL 33619

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCFARLANE-WILSON, MICHELLE
4623 RIVER OVERLOOK DRIVE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

MCFARLANE-WILSON, MICHELLE
10326 PALERMO CIRCLE
104
TAMPA, FL 33619 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: MICHELLE MCFARLANE WILSON 08/27/2008
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: MRS. ( ) Delete
Name: MCFARLANE-WILSON, MICHELLE
Address: 4623 RIVER OVERLOOK DRIVE
City-St-Zip: VALRICO, FL 33594

Title: MR. (X) Delete
Name: WILSON, GARY E
Address: 4623 RIVER OVERLOOK DRIVE
City-St-Zip: VALRICO, FL 33594

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS. (X) Change ( ) Addition
Name: MCFARLANE-WILSON, MICHELLE
Address: 10326 PALERMO CIRCLE # 104
City-St-Zip: TAMPA, FL 33619

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: MICHELLE MCFARLANE WILSON MRS. 08/27/2008
Electronic Signature of Signing Officer or Director Date