

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000173122

Entity Name: IMAGES BY KOURTNEY INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

1140 CASTLE WOOD TERRACE  
APT 100  
CASSELBERRY, FL 32707

## New Principal Place of Business:

1820 EMERALD GREEN CIRCLE  
OVIEDO, FL 32765

## Current Mailing Address:

1140 CASTLE WOOD TERRACE  
APT 100  
CASSELBERRY, FL 32707

## New Mailing Address:

1820 EMERALD GREEN CIRCLE  
OVIEDO, FL 32765

FEI Number: 20-2137202

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLEMAN-BROADNAX, KOURTNEY D P  
1140 CASTLE WOOD TER  
APT 100  
CASSELBERRY, FL 32707 US

## Name and Address of New Registered Agent:

COLEMAN, KOURTNEY D P  
1820 EMERALD GREEN CIRCLE  
OVIEDO, FL 32765 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: KOURTNEY COLEMAN

05/01/2009

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: MS ( ) Delete  
Name: COLEMAN-BROADNAX, KOURTNEY D P  
Address: 1140 CASTLE WOOD TER APT 100  
City-St-Zip: CASSELBERRY, FL 32707

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MRS (X) Change ( ) Addition  
Name: COLEMAN, KOURTNEY D P  
Address: 1820 EMERALD GREEN CIR  
City-St-Zip: OVIEDO, FL 32765

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: KOURTNEY COLEMAN

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date