

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000142821

Entity Name: ECB PHOTOGRAPHY, INC.

FILED  
Jan 06, 2011  
Secretary of State

**Current Principal Place of Business:**

9500 ATTICA CIRCLE  
PORT CHARLOTTE, FL 33981

**New Principal Place of Business:**

**Current Mailing Address:**

9500 ATTICA CIRCLE  
PORT CHARLOTTE, FL 33981

**New Mailing Address:**

FEI Number: 20-3629832

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRICKFIELD, EDMUND C ESQUIRE  
9500 ATTICA CIRCLE  
PORT CHARLOTTE, FL 33981 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BRICKFIELD, EDMUND C  
Address: 9500 ATTICA CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: SEC  
Name: BRICKFIELD, EDMUND C  
Address: 9500 ATTICA CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: TRES  
Name: BRICKFIELD, EDMUND C  
Address: 9500 ATTICA CIRCLE  
City-St-Zip: PORT CHARLOTTE, FL 33981

I hereby 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 all other like empowered.

SIGNATURE: EDMUND C. BRICKFIELD

PRES

01/06/2011

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

\_\_\_\_\_ Date