

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000028007

FILED  
Apr 26, 2011  
Secretary of State

**Entity Name:** BRIAN ADAMS PHOTOGRAPHICS, INC.

**Current Principal Place of Business:**

23 S. OSCEOLA AVE.  
ORLANDO, FL 32801

**New Principal Place of Business:**

2212 HILLCREST ST.  
ORLANDO, FL 32803

**Current Mailing Address:**

23 S. OSCEOLA AVE.  
ORLANDO, FL 32801

**New Mailing Address:**

2212 HILLCREST ST.  
ORLANDO, FL 32803

**FEI Number:** 20-4420829

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADAMS, BRIAN A MR.  
300 N. NEW YORK AVE.  
#3597  
WINTER PARK, FL 32789 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: PRES  
Name: ADAMS, BRIAN A MR.  
Address: P.O. BOX 3597  
City-St-Zip: WINTER PARK, FL 32790

Title: VP  
Name: ADAMS, BRIAN A MR.  
Address: P.O. BOX 3597  
City-St-Zip: WINTER PARK, FL 32790

Title: SEC  
Name: ADAMS, BRIAN A MR.  
Address: P.O. BOX 3597  
City-St-Zip: WINTER PARK, FL 32790

Title: TREA  
Name: ADAMS, BRIAN A MR.  
Address: P.O. BOX 3597  
City-St-Zip: WINTER PARK, FL 32790

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: BRIAN A ADAMS

PRES

04/26/2011

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

\_\_\_\_\_  
Date