2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2009
Secretary of State

DOCUMENT# P07000038262

Entity Name: MICHELLE FOSTER PHOTOGRAPHY, INC.

Current Principal Place of Business:

1702 NE 2ND STREET
OCALA, FL 34470

New Principal Place of Business:

103 SE TUSCAWILLA AVE.
OCALA, FL 34471

Current Mailing Address:

1702 NE 2ND STREET
OCALA, FL 34470

New Mailing Address:

103 SE TUSCAWILLA AVE.
OCALA, FL 34471

FEI Number: 20-8732582 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HALDIN, WILLIAM C JR
808 EAST FORT KING STREET
OCALA, FL 34471 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: PT ( ) Delete
Name: FOSTER, MICHELLE D
Address: 1702 NE 2ND STREET
City-St-Zip: OCALA, FL 34470

Title: VPS ( ) Delete
Name: FOSTER, BRUCE D
Address: 1702 NE 2ND STREET
City-St-Zip: OCALA, FL 34470

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: FOSTER, MICHELLE D
Address: 103 SE TUSCAWILLA AVE.
City-St-Zip: OCALA, FL 34471

Title: VPS (X) Change ( ) Addition
Name: FOSTER, BRUCE D
Address: 103 SE TUSCAWILLA AVE.
City-St-Zip: OCALA, FL 34471

Title: PT ( ) Change (X) Addition
Name: FOSTER, MICHELLE D PT
Address: 103 SE TUSCAWILLA AVE.
City-St-Zip: OCALA, FL 34471 US

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 FOSTER PT 02/03/2009
Electronic Signature of Signing Officer or Director Date