## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P09000043070

Entity Name: CALLIOPE RITCHIE PHOTOGRAPHY CORP

Apr 27, 2010 Secretary of State

**Current Principal Place of Business:** New Principal Place of Business:

60 SW 15TH STREET 490 SE MCNAB RD

POMPANO BEACH, FL 33060

POMPANO BEACH, FL 33060

**Current Mailing Address: New Mailing Address:** 

60 SW 15TH STREET 490 SE MCNAB RD

POMPANO BEACH, FL 33060 US

POMPANO BEACH, FL 33060

FEI Number: 27-0282335 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RITCHIE, CALLIOPE RITCHIE-JACKSON, CALLIOPE V

344 SE 11TH AVE 490 SE MCNAB RD

POMPANO BEACH, FL 33060 US POMPANO BEACH, FL 33060 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: CALLIOPE V RITCHIE-JACKSON 04/27/2010

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

RITCHIE-JACKSON, CALLIOPE Name: 490 SE MCNAB RD #3 Address: City-St-Zip: POMPANO BEACH, FL 33060 US

Title: VΡ

Name: JACKSON, TREMAINE O SR 1112 AVE F Address: FORT PIERCE, FL 34950 City-St-Zip:

VΡ Title:

RITCHIE, VERNICE W SR Name: 8057 SE SWAN AVE Address: City-St-Zip: HOBE SOUND, FL 33455

Title: VΡ

RITCHIE, GINA M SR Name: Address: 8057 SE SWAN AVE City-St-Zip: HOBE SOUND FL, FL 33455

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: CALLIOPE V RITCHIE-JACKSON Ρ 04/27/2010