

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Division of Corporations
Secretary of State
Division of Corporations

APPROVED
AND
FILED

30 MAY -1 AM 11:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000040439 (9)**

1. Corporation Name

HOT SHOTS PHOTOGRAPHY, INC.

Principal Place of Business

Mailing Address

**123 HAMMOCK RD
ANNA MARIA FL 34216**

**POB 1337
ANNA MARIA FL 34216**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Reinstated
05/25/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 **5339 GULF DR**

26 **Same**

22 Suite Apt # etc

27 Suite Apt # etc

23 City & State

28 City & State

Holmes Beach

FL

24 **34217**

25 **Manatee**

29 **FL**

30 **FL**

4. FEI Number

65-0496801

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HEIST, H. ANTHONY
1661 ESTERO BLVD
STE 20
FT MYERS BEACH FL 33932**

81 Name **PATRICIA A. PAYNE**

82 Street Address (P.O. Box Number is Not Acceptable)
123 Hammock Rd.

83

84 City **Anna Maria**

FL

85 Zip Code
34216

11. Pursuant to the provisions of Sections 607.0501 and 607.1504, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Patricia A. Payne

(Signature of Registered Agent must be typed below signature)

5/1/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 TITLE	12.2 NAME	12.3 STREET ADDRESS	12.4 CITY, ST, ZIP
	D	PAYNE, PATRICIA	123 HAMMOCK RD POB 1337
		ANNA MARIA FL 34216	

13.1 TITLE	13.2 NAME	13.3 STREET ADDRESS	13.4 CITY, ST, ZIP
☐ Change ☐ Addition			
☐ Change ☐ Addition			
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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.03(2)(b), Florida Statutes. I further certify that the information submitted on this annual report or biennial report is true and accurate and that my 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 the person empowered to receive this report as required by Chapter 67, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

Patricia A. Payne
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95 (913) 779-1400