

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 15, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000077925

1. Entity Name
REEDY PHOTOPROCESS S.E. CORPORATION



Principal Place of Business
**12125 28TH ST. NORTH
ST. PETERSBURG, FL 33716**

Mailing Address
**12125 28TH ST. NORTH
ST. PETERSBURG, FL 33716**



01032006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2110882

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SCOTT, GEORGE C
12125 28TH ST. NORTH
ST. PETERSBURG, FL 33716**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**P
REEDY, STAN
1932 BECKETT LAKE DR
CLEARWATER, FL**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**VP
SCOTT, GEORGE C
12125 28 ST N
ST PETERSBURG, FL**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**VP
FRASER, MICHAEL
1126 CAPTAINS WAY
JUPITER, FL 33469**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

M. C. Jones **V.P.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-10-06
Date

Daytime Phone #