

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 03, 2008 8:00 am**  
**Secretary of State**

04-03-2008 90025 015 \*\*\*150.00

**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**

**DO NOT WRITE IN THIS SPACE**

02132008 No Chg-P CR2E034 (11/05)

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	REEDY, STAN
STREET ADDRESS	1932 BECKETT LAKE DR
CITY-ST-ZIP	CLEARWATER, FL
TITLE	VP
NAME	SCOTT, GEORGE C
STREET ADDRESS	12125 28 ST N
CITY-ST-ZIP	ST PETERSBURG, FL
TITLE	VP
NAME	FRASER, MICHAEL
STREET ADDRESS	319 WOOD IBIS AVE
CITY-ST-ZIP	TARPON SPRINGS, FL 34689
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/08

727-572-0093

Date

Daytime Phone #