

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000045422

**FILED**  
**Apr 03, 2005**  
**Secretary of State**

**Entity Name:** FRANK DIENST PHOTOGRAPHY, INC.

**Current Principal Place of Business:**

3940 PINETOP BLVD.  
TITUSVILLE, FL 32796

**New Principal Place of Business:**

5430 AMY WAY  
MIMS, FL 32754

**Current Mailing Address:**

3940 PINETOP BLVD.  
TITUSVILLE, FL 32796

**New Mailing Address:**

5430 AMY WAY  
MIMS, FL 32754

**FEI Number:** 59-3515443

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIENST, FRANK T  
3940 PINETOP BLVD  
TITUSVILLE, FL 32796 US

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

DIENST, FRANK T  
5430 AMY WAY  
MIMS, FL 32754 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:**

04/03/2005

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DIENST, FRANK T  
Address: 3940 PINETOP BLVD  
City-St-Zip: TITUSVILLE, FL 32796

Title: ST ( ) Delete  
Name: DIENST, MARILYN  
Address: 3940 PINETOP BLVD  
City-St-Zip: TITUSVILLE, FL 32796

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: DIENST, FRANK T  
Address: 5430 AMY WAY  
City-St-Zip: TITUSVILLE, FL 32754

Title: ST (X) Change ( ) Addition  
Name: DIENST, MARILYN  
Address: 5430 AMY WAY  
City-St-Zip: MIMS, FL 32754

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:** MARILYN DIENST

ST

04/03/2005

Electronic Signature of Signing Officer or Director

Date