

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000001266

FILED
Apr 22, 2008
Secretary of State

Entity Name: THE PICTURE FACTORY OF FT. MYERS, INC.

Current Principal Place of Business:

THE PICTURE FACTORY
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

2320 VANDERBILT BEACH RD
NAPLES, FL 34109

New Mailing Address:

FEI Number: 20-1631951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRISON, DAVID
C/O MORRISON & CONROY, P.A.
3838 TAMiami TRAIL NORTH SUITE 402
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: CISKIE, ROGER D
Address: 675 WEST AVE
City-St-Zip: NAPLES, FL 34108

Title: P () Delete
Name: CISKIE, STEVE
Address: 4325 QUEEN ELIZABETH WAY
City-St-Zip: NAPLES, FL 34119

Title: T () Delete
Name: MURROW, SKIP
Address: 7508 SAN MIGUEL WAY
City-St-Zip: NAPLES, FL 34109

Title: CEO () Delete
Name: ROSSLER, JOHN C
Address: 2320 VANDERBILT BCH RD
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SKIP MURROW

T

04/22/2008

Electronic Signature of Signing Officer or Director

Date