

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 26, 2004  
Secretary of State**

DOCUMENT# N00000007920

Entity Name: KREAM PRODUCTIONS, INC.

**Current Principal Place of Business:**

801 SOUTH KOTTLE CIRCLE  
DAYTONA BEACH, FL 32114

**New Principal Place of Business:**

**Current Mailing Address:**

801 SOUTH KOTTLE CIRCLE  
DAYTONA BEACH, FL 32114

**New Mailing Address:**

FEI Number: 59-3690353      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HAYES, EDWARD H JR.  
801 SOUTH KOTTLE CIRCLE  
DAYTONA BEACH, FL 32114      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

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: HAYES, EDWARD H JR.  
Address: 801 SOUTH KOTTLE CIRCLE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VD      ( ) Delete  
Name: HAYES, JOERETHA S  
Address: 801 SOUTH KOTTLE CIRCLE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: STD      ( ) Delete  
Name: CHARITY, LAVETA C  
Address: 801 SOUTH KOTTLE CIRCLE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: BM      ( ) Delete  
Name: POWELL, HIRAM  
Address: 640 DR MERY M BETHUNE BLVD  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: BM      ( ) Delete  
Name: WELCH, JOHNNIE  
Address: 2043 UNION STREET  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: BM      ( ) Delete  
Name: WELCH, CONNIE  
Address: 2043 UNION STREET  
City-St-Zip: SAINT PETERSBURG, FL 33712

**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:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD H. HAYES, JR.

PD

02/26/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date