2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007454

FILED Jan 28, 2009 Secretary of State

Entity Name: CREATIVE CITY COLLABORATIVE OF DELRAY BEACH, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
100 NW 1 DELRAY E	ST AVE. BCH, FL 33444				
Current Mailing Address:			New Maili	New Mailing Address:	
100 NW 1 DELRAY E	ST AVE. BCH, FL 33444				
FEI Number	: 26-3210202	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of Cu	urrent Registered Agent:	Name and	Address of New Registered Agent:	
100 NW 1 DELRAY E	BCH, FL 33444	US			
	named entity sue of Florida.	ubmits this statement for the p	ourpose of changing i	its registered office or registered agent, or both,	
SIGNATU					
	Electronic	c Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	D () [ALPERIN, JAY 2100 LAKE IDA F DELRAY BCH, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () [BOURQUE, FRAI 4780 S. LAKE DI BOYNTON BCH,	R.	Title: Name: Address: City-St-Zip:	() Change () Addition	
	D ()[FARRINGTON, V	Delete VERA	Title: Name:	D (X) Change () Addition CARTER, MELISSA	
Vame: Address:	170 SW 5TH AVE DELRAY BCH, F	E.	Address: City-St-Zip:	51 N. SWINTON AVE.	
Title: Name: Address: City-St-Zip: Title: Name: Address: Cdty-St-Zip:	170 SW 5TH AVE DELRAY BCH, F D () I HARRIS, JOHN 770 E. ATLANTIO	E. L 33444 Delete JR. C AVE.	Address:	51 N. SWINTON AVE.	
Name: Address: City-St-Zip: Fitle: Name: Address:	170 SW 5TH AVE DELRAY BCH, F D () I HARRIS, JOHN 770 E. ATLANTIC DELRAY BCH, F	E. L 33444 Delete JR. C AVE. L 33483 Delete BERTA	Address: City-St-Zip: Title: Name: Address:	51 N. SWINTON AVE. DELRAY BCH, FL 33444	

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

SIGNATURE: ROBERT A. BARCINSKI RA 01/28/2009