

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000074659

Entity Name: CARIBBEAN COTTAGES, INC.

FILED
May 29, 2008
Secretary of State

Current Principal Place of Business:

1414 NO. LAKESHORE DR
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

PO BOX 5033
SARASOTA, FL 34277

New Mailing Address:

FEI Number: 65-1126716

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOOLEY, WILLIAM A
1432 FIRST STREET
SARASOTA, FL 34236 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CREIGHTON, GARRETSON J III
Address: 1414 NO. LAKESHORE DR
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: CREIGHTON, CHERYL M
Address: 1414 NO. LAKESHORE DR.
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHERYL M. CREIGHTON

D

05/29/2008

Electronic Signature of Signing Officer or Director

_____ Date