

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P95000094911 (1)**

1. Corporation Name  
**CREATIVE DECK AND DOCK, INC.**



Principal Place of Business: **2851 PALERMO CT. ORLANDO FL 32806-5562**  
Mailing Address: **2851 PALERMO CT. ORLANDO FL 32806-5562**

3. Date Incorporated or Qualified: **12/11/1995**  
3a. Date of Last Report: [ ]  
4. FEI Number: **59-3348464**  
5. Certificate of Status Desired: [ ] **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution: [ ] **\$5.00 May Be Added to Fees**  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: [21] [ ]  
2a. Mailing Address: [26] [ ]  
22. State, Apt. #, etc.: [ ] [ ]  
27. State, Apt. #, etc.: [ ] [ ]  
23. City & State: [ ] [ ]  
28. City & State: [ ] [ ]  
24. Zip: [ ] [ ] Country: [ ] [ ]  
25. Zip: [ ] [ ] Country: [ ] [ ]  
29. Zip: [ ] [ ] Country: [ ] [ ]  
30. Zip: [ ] [ ] Country: [ ] [ ]

9. Name and Address of Current Registered Agent  
**TEGELER, RONALD W  
2851 PALERMO CT.  
ORLANDO FL 32806-5562**

10. Name and Address of New Registered Agent  
81. Name: [ ]  
82. Street Address (P.O. Box Number is Not Acceptable): [ ]  
83. [ ]  
84. City: [ ]  
85. Zip Code: **FL** [ ]

11. Pursuant to the provisions of Sections 607.0509 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0509, Florida Statutes. **NO CHANGE**

SIGNATURE: **RONALD W. TEGELER**

**2/23/96**

12. OFFICERS AND DIRECTORS

1. TITLE	DPST	<input type="checkbox"/> DELETE
2. NAME	TEGELER, RONALD W	
3. STREET ADDRESS	2851 PALERMO CT.	
4. CITY-STATE-ZIP	ORLANDO FL 32806-5562	
5. TITLE		<input type="checkbox"/> DELETE
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		
9. TITLE		<input type="checkbox"/> DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE		<input type="checkbox"/> DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE		<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2. NAME	SIT Catherine Tegeler	
3. STREET ADDRESS	2851 Palermo Ct.	
4. CITY-STATE-ZIP	Orlando, FL 32806-5562	
5. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		
9. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 or empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Book 12 or Book 13 if changed, or on an attachment to an address.

SIGNATURE: **Ronald W. Tegeler** **RONALD W. Tegeler** **2/23/96** **407-839-3466**

CR2E034 (12/95)