2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2004 8:00 am
Secretary of State
01-09-2004 90068 027 ***158.75

DOCUMENT # K89160

1. Entity Name
CREATIVE MARKETING PRODUCTS, INC.

24000424

Principal Place of Business	Mailing Address
3460 FAIRLANE FARMS RD. SUITE 13 WEST PALM BEACH, FL 33414 US	3460 FAIRLANE FARMS RD. SUITE 13 WEST PALM BEACH, FL 33414 US

01072004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0126139 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CRANSTON, MARY SUE
3460 FAIRLANE FARMS RD. SUITE 13
WELLINGTON, FL 33414

7. Name and Address of New Registered Agent

Name DARELL BOWEN
Street Address (P.O. Box Number is Not Acceptable)
3460 FAIRLANE FARMS RD. #13
City WELLINGTON FL Zip Code 33414

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ 1/7/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DIRECTOR CRANSTON, MARY S 12253 ROCKLEDGE CIR BOCA RATON, FL 33428	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DIRECTOR CRANSTON, MARY S 12253 ROCKLEDGE CIR BOCA RATON FL 33428	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VP~~ SECRETARY TREASURER DIRECTOR NEWKIRK, JEFFREY JAMES 4252 HUNTING TRAIL LAKE WORTH, FL 33467	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SEC'Y TREAS DIR NEWKIRK, JEFFREY JAMES 4252 HUNTING TRAIL LAKE WORTH, FL 33467	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DIRECTOR BOWEN, DARELL 12669 HEADWATER WAY WELLINGTON, FL 33414	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DIRECTOR BOWEN, DARELL 12669 HEADWATER WAY WELLINGTON, FL 33414	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DIRECTOR BOWEN, SHERRY 12669 HEADWATER WAY WELLINGTON, FL 33414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: DARELL BOWEN 1/7/04 561-758-2424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #