

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000005837

**Entity Name:** CREATIVE CITY PROJECT, INC.**Current Principal Place of Business:**1316 PORTLAND AVE  
ORLANDO, FL 32803**Current Mailing Address:**PO BOX 4346  
ORLANDO, FL 32802 US**FEI Number:** 47-1158982**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HEIDE, EVANS R  
1316 PORTLAND AVE  
ORLANDO, FL 32803 US*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:** HEIDE EVANS

04/30/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, FOUNDER & ARTISTIC  
DIRECTOR  
Name NESMITH, COLE A  
Address 1316 PORTLAND AVE  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name COHEN, KELLY  
Address 28 W CENTRAL BLVD  
SUITE 260  
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR  
Name JACOBSEN, ERIC  
Address 425 N BUMBY AVE  
City-State-Zip: ORLANDO FL 32803

Title DIRECTOR  
Name BOWMAN, SCOTT  
Address 1121 NORTH MILLS AVE  
City-State-Zip: ORLANDO FL 32803

Title BOARD SECRETARY, EXECUTIVE  
PRODUCER  
Name MARSHALL, MELYSSA R  
Address PO BOX 2868  
City-State-Zip: ORLANDO FL 32802

Title DIRECTOR  
Name GONZÁLEZ, ELISHA  
Address 135 WEST CENTRAL BLVD.  
SUITE 1200  
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR  
Name KEOUGH, CHRIS  
Address 3255 PRIME PARK CIRCLE  
APT 445  
City-State-Zip: KISSIMMEE FL 34746

Title DIRECTOR  
Name SUGISAWA, THALI  
Address 9980 HARTFORD MAROON RD  
City-State-Zip: ORLANDO FL 32827

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*I hereby 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 all other like empowered.*

**SIGNATURE:** HEIDE EVANS**EXECUTIVE DIRECTOR**

04/30/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name RALLS, GEORGE DR.  
Address 45 W CRYSTAL LAKE ST.  
SUITE 201  
City-State-Zip: ORLANDO FL 32806

Title EXECUTIVE DIRECTOR  
Name EVANS, HEIDE R  
Address 130 S MASSACHUSETTS AVE  
SUITE 308  
City-State-Zip: LAKELAND FL 33801