

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 376132

**FILED**  
**Mar 19, 2012**  
**Secretary of State**

**Entity Name:** CREAMER CORPORATION

**Current Principal Place of Business:**

338 W HWY 388  
SOUTHPORT, FL 32409 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 8566  
SOUTHPORT, FL 32409 US

**New Mailing Address:**

**FEI Number:** 59-1347362

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CREAMER, ARCHIE A  
338 W HWY 388  
SOUTHPORT, FL 32409 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CREAMER, ARCHIE A  
Address: 338 W HWY 388  
City-St-Zip: SOUTHPORT, FL

Title: STD  
Name: CREAMER, LISHA  
Address: 338 W HWY 388  
City-St-Zip: SOUTHPORT, FL

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

SIGNATURE: ARCHIE CREAMER

PRES

03/19/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date