

FILED
Jun 18, 2003 8:00 am
Secretary of State

06-18-2003 90023 044 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 437503			
1. Entity Name CREATIONS UNLIMITED, INC			
Principal Place of Business 630 AVENUE A NE WINTER HAVEN, FL 33881-4874		Mailing Address 17458 FRONT BEACH RD PANAMA CITY BEACH, FL 32413 US	
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		Applied For ☒ Not Applicable	
5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
BROWER, PETER H., III 630 AVENUE A NE WINTER HAVEN, FL 33880			
7. Name and Address of New Registered Agent			
Name			
Street Address (P.O. Box Number is Not Acceptable)			
City			
FL Zip Code			
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			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when instituting)			
DATE			
9. Election Campaign Financing Trust Fund Contribution.		☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	PD BROWER, PETER H., III 630 AVENUE A NE WINTER HAVEN, FL	☐ Delete	
TITLE	VD BROWER, JUDY D. 630 AVENUE A NE WINTER HAVEN, FL	☐ Delete	
TITLE	SD BROWER, BENJAMIN D 630 AVE A NE WINTER HAVEN, FL	☐ Delete	
TITLE		☐ Delete	
TITLE		☐ Delete	
TITLE		☐ Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE		☐ Change ☐ Addition	
TITLE		☐ Change ☐ Addition	
TITLE		☐ Change ☐ Addition	
TITLE		☐ Change ☐ Addition	
TITLE		☐ 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)(1), 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: <i>Judy D. Brower</i> <i>Judy D. Brower 4/2/03 (863) 64702316</i>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

90139957



☐ CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)

Attachment
90139957
437503

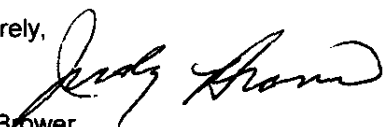
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399
ATTN: Tyrone Scott

6/12/2003

As per your instructions, I am sending a copy of the original UBR that I mailed on 4/23/03. As I explained to you the check attached to the filing has not yet been presented to my bank for payment (check # 2485 for \$150.00). I am submitting another check along with the copy of the filing. Please waive any late fees.

Thank you for your help in resolving this problem.

Sincerely,


Judy Brower