

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2005 08:00 AM
Secretary of State

DOCUMENT # 677926

1. Entity Name
CREATIVE MARBLE, INC.



Principal Place of Business

**CREATIVE MARBLE, INC. 501-507 HYW
85A P.O. BOX 456
VALPARAISO, FL 32580**

Mailing Address

**CREATIVE MARBLE, INC. 501-507 HYW
85A P.O. BOX 456
VALPARAISO, FL 32580**



03312005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2014939

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**RIEDEL, DONALD W.
275 SOUTH BAYSHORE DRIVE
VALPARAISO, FL 32580**

**DO NOT WRITE
IN THIS SPACE**

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 signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RIEDEL, DONALD W.
STREET ADDRESS	275 S. BAYSHORE DR.
CITY-ST-ZIP	VALPARAISO, FL
TITLE	VD
NAME	RIEDEL, DONALD W., II
STREET ADDRESS	275 S. BAYSHORE DR.
CITY-ST-ZIP	VALPARAISO, FL
TITLE	STD
NAME	RIEDEL, HELEN C.
STREET ADDRESS	275 S. BAYSHORE DR.
CITY-ST-ZIP	VALPARAISO, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/20/05-80006-008 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Donald W. Riedel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-31-05

Date

850-678 6620

Daytime Phone #