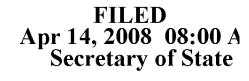
## 2008 FOR PROFIT CORPORATION

## **ANNUAL REPORT DOCUMENT #679751** 1. Entity Name THE CREATIVE PRINTING PLACE, INC. Mailing Address Principal Place of Business 1414 HENDROKSAVE





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1414	HENCH	OS

JACKSONMILLE, FL 32207 aJ.



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No Cha-P CR2E034 (11/05) 01082008

4. FEI Number 59-2021538

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

WELCH, CAROL A. 717 ST MORITZ CT SWITZERLAND, FL 32259

SIGNATURE

TITLE NAME STREET ADDRESS

JACKSOMILLE FL 32207

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is a printered effice or registered agent or both in the State of Florida.	I am familiar with, and accept
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.	
the obligations of registered agent.	•

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing

Trust Fund Contribution.

\$5.00 May Be Added to Fees

U00000893906

04/24/08-80006-022 150.00

OFFICERS AND DIRECTORS 10. PDT TITLE WELCH, CAROL A. NAME 717 ST MORITZ CT STREET ADDRESS CITY-ST-ZIP SWITZERLAND, FL DVS TITLE WELCH, DANIEL E. NAME 2559 PRIMROSE AVENUE STREET ADDRESS CITY-ST-ZIP MIDDLEBURG, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME. STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

arol A. Welch 4-11-08 904-398-9