

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744325

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** CREATIVE SERVICES INCORPORATED

**Current Principal Place of Business:**

2001 SW 3RD AVE  
OCALA, FL 34471 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2193  
OCALA, FL 34478

**New Mailing Address:**

PO BOX 2193  
OCALA, FL 34478 US

**FEI Number:** 59-1876422

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SHOOK, JAMES A ESQ.  
22062 E HWY 316  
SALT SPRINGS, FL 32134 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: PRES  
Name: PAULS, JOHN A JR  
Address: 6290 W ANTHONY ROAD  
City-St-Zip: OCALA, FL 34479 US

Title: S  
Name: ROBINSON, GEORGE V  
Address: 15455 SW 35TH AVE.  
City-St-Zip: DUNNELLON, FL 34432 US

Title: VP  
Name: GOODARD, DARLENE  
Address: 20301 SW 86TH LOOP  
City-St-Zip: DUNNELLON, FL 34431 US

Title: T  
Name: STALEY, MICHAEL B  
Address: 9622 NW 30TH AVE  
City-St-Zip: OCALA, FL 34475 US

Title: DIR  
Name: TERRY, MONA  
Address: 1601 NE 25TH AVE #306  
City-St-Zip: OCALA, FL 34471 US

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:** JOHN A PAULS JR

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02/17/2011

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

\_\_\_\_\_  
Date