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FILED

Feb 04 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 760391 (3)

1. Corporation Name

CREATIVE CRAFT CO-OP, INC.



Principal Place of Business

Mailing Address

5855 TALLOWOOD CIR SW  
FT MYERS FL 33919  
US5855 TALLOWOOD CIR SW  
FT MYERS FL 33919-3466  
US3. Date Incorporated or Qualified  
10/13/19813a. Date of Last Report  
02/07/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City &amp; State

City &amp; State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number  
65-0043241Applied For  
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution ☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOSTER, V.C.  
5855 TALLOWOOD CIRCLE  
FT. MYERS FL 33919

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

V.C. Foster (V.C. Foster) TREASURER

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	KELLER, ROBERT	
STREET ADDRESS	16209 ASHBORO CT	
CITY - ST - ZIP	FT MYERS FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	

TITLE	TD	<input type="checkbox"/> DELETE
NAME	FOSTER, V.C.	
STREET ADDRESS	5855 TALLOWOOD CIRCLE	
CITY - ST - ZIP	FT. MYERS FL 33919	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	

TITLE	VPD	<input type="checkbox"/> DELETE
NAME	BEATTY, CLEON	
STREET ADDRESS	144 EVERGREEN SWAN LAKE	
CITY - ST - ZIP	NORTH FT. LAUDERDALE FL 33917	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	

TITLE	SD	<input type="checkbox"/> DELETE
NAME	OPTENBERG, CLAUDIA	
STREET ADDRESS	19149 INDIANWELLS COURT NW	
CITY - ST - ZIP	NORTH FT. LAUDERDALE FL 33903	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	

TITLE	D	<input type="checkbox"/> DELETE
NAME	YOUNG, BILL	
STREET ADDRESS	4391 23RD PLACE SW	
CITY - ST - ZIP	NAPLES FL 33909	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	

TITLE	D	<input type="checkbox"/> DELETE
NAME	LINDSLY, IRMA	
STREET ADDRESS	2329 QUEENS WAY	
CITY - ST - ZIP	NAPLES FL 33962	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

V.C. Foster TREASURER V.C. Foster 2/27/97

CR2E037 (9/96)