

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000000697

FILED
Apr 22, 2009
Secretary of State

Entity Name: CREATIVE DINING SERVICES, INC.

Current Principal Place of Business:

ONE ROYAL PARK DR
SUITE 3
ZEELAND, MI 49464

New Principal Place of Business:

Current Mailing Address:

ONE ROYAL PARK DR
SUITE 3
ZEELAND, MI 49464

New Mailing Address:

FEI Number: 38-2915451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, MARTIN
US 41
BONITA SPRINGS, FL 34135 US

Name and Address of New Registered Agent:

SAN FILIPPO, KRISTIANA
26501 US 41
BONITA SPRINGS, FL 34135 US

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: KRISTIANA SAN FILIPPO 04/22/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: HILIGAN, STEVE
Address: 1 ROYAL PARK DRIVE, STE 3
City-St-Zip: ZEELAND, MI 49464

Title: DIR () Delete
Name: DEVRIES, HENRY
Address: 3201 BURTON SE
City-St-Zip: GRAND RAPIDS, MI 49546

Title: DIR () Delete
Name: HOOGSTRA, SHIRLEY
Address: 3201 BURTON SE
City-St-Zip: GRAND RAPIDS, MI 49546

Title: SEC () Delete
Name: RENZ, STEVE
Address: 1 ROYAL PARK DRIVE SUITE 3
City-St-Zip: ZEELAND, MI 49464

Title: DIR () Delete
Name: FROST, RICHARD
Address: PO BOX 9000
City-St-Zip: HOLLAND, MI 49422

Title: DIR () Delete
Name: BYLSMA, TOM
Address: PO BOX 9000
City-St-Zip: HOLLAND, MI 49422

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVE HILIGAN PRES 04/22/2009
Electronic Signature of Signing Officer or Director Date