

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H27343

FILED  
Jan 20, 2004  
Secretary of State

Entity Name: CREATIVE INK, INCORPORATED

**Current Principal Place of Business:**

3801 MCINTOSH RD  
SARASOTA, FL 34232 US

**New Principal Place of Business:**

**Current Mailing Address:**

3801 MCINTOSH RD  
SARASOTA, FL 37232 US

**New Mailing Address:**

FEI Number: 59-2464977

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCCALL, LEE  
3321 CATTLEMEN RD.  
SARASOTA, FL 34236 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MCCALL, M. LEE  
Address: 4514 FRIAR TUCK LANE  
City-St-Zip: SARASOTA, FL 34232

Title: VP ( ) Delete  
Name: BRANSON, KELLY  
Address: 3416 NOEL CT.  
City-St-Zip: RALEIGH, NC 27607

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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 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: M. LEE MCCALL

P

01/20/2004

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

\_\_\_\_\_  
Date