

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H40892

Entity Name: CREATIVE SIGNS, INC.

FILED
Jan 27, 2009
Secretary of State

Current Principal Place of Business:

3410 N. ORANGE BLOSSOM TRAIL
ORLANDO, FL 32804

New Principal Place of Business:

2301 N. HIAWASSEE ROAD
APOPKA, FL 32703

Current Mailing Address:

P.O. BOX 608070
ORLANDO, FL 328608070

New Mailing Address:

FEI Number: 59-2501276

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DISALVATORE, CHERYL A
6521 HAWKSMOOR DR.
ORLANDO, FL 32818 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: T () Delete
Name: DISALVATORE, ANTONIO J JR.
Address: 6521 HAWKSMOOR DR
City-St-Zip: ORLANDO, FL 32818

Title: S () Delete
Name: DISALVATORE, CHERYL A
Address: 6521 HAWKSMOOR DRIVE
City-St-Zip: ORLANDO, FL 32818

Title: P () Delete
Name: DISALVATORE, ANTHONIO J SR.
Address: 6521 HAWKSMOOR DR
City-St-Zip: ORLANDO, FL 32818

Title: VP () Delete
Name: DISALVATORE, MATTHEW L
Address: 6521 HAWKSMOOR DRIVE
City-St-Zip: ORLANDO, FL 32818

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: DISALVATORE, ANTONIO J JR.
Address: 6 E. ALBATROSS STREET
City-St-Zip: APOPKA, FL 32712

Title: () Change () Addition
Name:
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: CHERYL DISALVATORE

S

01/27/2009

Electronic Signature of Signing Officer or Director

Date