

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H58780

Entity Name: APPLIED CREATIVITY, INC.

FILED
Jan 13, 2005
Secretary of State

Current Principal Place of Business:

13498 ALPINE AVENUE, N.
SEMINOLE, FL 33776

New Principal Place of Business:

Current Mailing Address:

PO BOX 3641
SEMINOLE, FL 33775

New Mailing Address:

FEI Number: 59-2552398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALEM, RICHARD J.
101 EAST KENNEDY BLVD
1 BARNETT PLAZA, STE 3200
TAMPA, FL 33601 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: DP () Delete
Name: COULSON, LOUIS T., I, II
Address: 13498 ALPINE AVE.N.
City-St-Zip: SEMINOLE, FL

Title: D () Delete
Name: STRICKLAND, ALISON G, .
Address: 13498 ALPINE AVE.N.
City-St-Zip: SEMINOLE, FL

Title: CST () Delete
Name: STRICKLAND, ALISON G, .
Address: 13498 ALPINE AVE.N.
City-St-Zip: SEMINOLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: COULSON, LOUIS T., I, II
Address: 13498 ALPINE AVE.N.
City-St-Zip: SEMINOLE, FL 33776

Title: D (X) Change () Addition
Name: STRICKLAND, ALISON G, .
Address: 13498 ALPINE AVE.N.
City-St-Zip: SEMINOLE, FL 33776

Title: CST (X) Change () Addition
Name: STRICKLAND, ALISON G, .
Address: 13498 ALPINE AVE.N.
City-St-Zip: SEMINOLE, FL 33776

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: LOUIS T. COULSON III

DP

01/13/2005

Electronic Signature of Signing Officer or Director

Date