2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2009
Secretary of State

DOCUMENT# K88997

Entity Name: CREATIVE DESIGNS, INC.

Current Principal Place of Business:

2195 HIGHWAY A1A
UNIT #401
INDIAN HARBOUR BEACH, FL 32937 US

New Principal Place of Business:

2 SINCLAIR CIRCLE
INDIALANTIC, FL 32903 US

Current Mailing Address:

2195 HIGHWAY A1A
UNIT #401
INDIAN HARBOUR BEACH, FL 32937 US

New Mailing Address:

2 SINCLAIR CIRCLE
INDIALANTIC, FL 32903 US

FEI Number: 59-2960977 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONCRIEF, S KIRBY
1001 HEATHROW PARK LANE
SUITE 4001
LAKE MARY, FL 32746 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: PT ( ) Delete
Name: COMPTON, WILLIAM C
Address: 2195 HIGHWAY A1A, UNIT #401
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

Title: D ( ) Delete
Name: COMPTON, WILLIAM C
Address: 2195 HIGHWAY A1A, UNIT #401
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

Title: VPS ( ) Delete
Name: COMPTON, TINA A
Address: 2195 HIGHWAY A1A, UNIT #401
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937 US

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:

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: TINA A COMPTON VP 03/16/2009
Electronic Signature of Signing Officer or Director Date