2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 06, 2004
Secretary of State

DOCUMENT# L03000046177

Entity Name: CREATIVELOGIX, LLC

Current Principal Place of Business:

2006 HEMINGWAY CIRCLE
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

2006 HEMINGWAY CIRCLE
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 20-0424109 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: KAPS, ADAM J
Address: 2006 HEMINGWAY CIRCLE
City-St-Zip: HAINES CITY, FL 33844

Title: MGRM ( ) Delete
Name: SEWALL, BRIAN M
Address: 4523 COMMANDER DRIVE, #2138
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: SEWALL, BRIAN M
Address: 704 CENTERVALE DR
City-St-Zip: CELEBRATION, FL 34747

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: BRIAN M SEWALL MGMR 07/06/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date