

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000061187

Entity Name: CREATIVA-TEES L.L.C.

FILED  
Jan 07, 2010  
Secretary of State

**Current Principal Place of Business:**

1816 OLIVIA CIRCLE  
APOPKA, FL 32703 US

**New Principal Place of Business:**

**Current Mailing Address:**

1816 OLIVIA CIRCLE  
APOPKA, FL 32703 US

**New Mailing Address:**

FEI Number: 26-2921201

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MCLAUGHLIN, ALINA J  
1816 OLIVIA CIRCLE  
APOPKA, FL 32703 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/MANAGERS:**

Title: MGR  
Name: MCLAUGHLIN, ALINA J  
Address: 1816 OLIVIA CIRCLE  
City-St-Zip: APOPKA, FL 32703 US

Title: MGR  
Name: ADAMS, STACEY L ADAMS  
Address: 1816 OLIVIA CIRCLE  
City-St-Zip: APOPKA, FL 32703

Title: N/A  
Name: N/A, N/A  
Address: 1816 OLIVIA CIRCLE  
City-St-Zip: APOPKA, FL 32703

Title: N/A  
Name: N/A, N/A  
Address: 1816 OLIVIA CIRCLE  
City-St-Zip: APOPKA, FL 32703

Title: N/A  
Name: N/A, N/A  
Address: 1816 OLIVIA CIRCLE  
City-St-Zip: APOPKA, FL 32703

Title: N/A  
Name: N/A, N/A  
Address: 1816 OLIVIA CIRCLE  
City-St-Zip: APOPKA, FL 32703

I hereby 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: ALINA MCLAUGHLIN

MGR

01/07/2010

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