2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005049

FILED Mar 08, 2009 Secretary of State

Entity Name: SIMPLY DIVINE CREATIONS, TOO, INC.

urrent P	rincipal Place	of Business:	New Principal Plac	e of Business:
	KSON STREET	,		
D2 OLLYWC	DOD, FL 33020			
current Mailing Address:			New Mailing Addre	ss:
O BOX 2: OLLYWO	22253 DOD, FL 33022	!		
El Number:	: 65-1126214	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	l Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
2123 RO	, MARY L REV CKWELL WAY TON, FL 33428	3 US		
20 0hovo	named antity a	ubmits this statement for the	nurnaca of changing its register	ad office or registered agent, or both
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its register	ed office or registered agent, or both
	e of Florida.	ubmits this statement for the	purpose of changing its register	red office or registered agent, or both
the State	e of Florida. RE:	ubmits this statement for the place.		red office or registered agent, or both Date
the State	e of Florida. RE:	c Signature of Registered Ag	ent	
the State	e of Florida. RE: Electroni S AND DIRECT	ic Signature of Registered Ag F ORS: Delete Y L REV ELL WAY	ent	Date
the State IGNATUR FFICER: tle: ame: ddress:	e of Florida. RE: Electroni S AND DIRECT D () MEEKINS, MAR' 12123 ROCKWE BOCA RATON, F	ic Signature of Registered Ag FORS: Delete Y L REV ELL WAY FL 33428 Delete BORAH CE	ent ADDITIONS/CHANG Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO
the State GNATUF FFICERS le: ime: idress: ty-St-Zip: le: ime: idress:	E of Florida. RE: Electroni S AND DIRECT D () MEEKINS, MAR' 12123 ROCKWE BOCA RATON, F EX D () WILLIAMS, DEB 2532 NW 9 PLA FT LAUDERDAL	ic Signature of Registered Ag FORS: Delete Y L REV ELL WAY FL 33428 Delete BORAH CE E, FL 33311 Delete RABBI ELL WAY	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date GES TO OFFICERS AND DIRECTO () Change () Addition

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY L. MEEKINS REV. 03/08/2009