

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005683

FILED  
May 02, 2006  
Secretary of State

Entity Name: CREATION TWO INC.

## Current Principal Place of Business:

623 E NOBLE AVE  
WILLISTON, FL 32696

## New Principal Place of Business:

115 SE 10TH STREET  
WILLISTON, FL 32696

## Current Mailing Address:

623 E NOBLE AVE  
WILLISTON, FL 32696

## New Mailing Address:

P.O.BOX 281  
BRONSON, FL 32621

FEI Number: 65-1135391      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

BREE, DANYELLE  
5745 SW 75 ST #257  
GAINESVILLE, FL 32608      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

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BREE, DANYELLE  
Address: 5745 SW 75 ST #257  
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete  
Name: BROWN, EVON  
Address: 8334 DUOMO CIR.  
City-St-Zip: BOYNTON BCH, FL 33467

Title: COO ( ) Delete  
Name: JONES, JOHNNIE  
Address: 12030 NE 63 PL  
City-St-Zip: WILLISTON, FL 32696

Title: D ( ) Delete  
Name: BOATWRIGHT, GUSSIE  
Address: 891 NE 200 AVE  
City-St-Zip: WILLISTON, FL 32696

Title: D ( ) Delete  
Name: BROWN, JOYCE  
Address: 2786 NW 104 AVE #306  
City-St-Zip: SUNRISE, FL 33322

## 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:

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 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: DANYELLE BREE

D

05/02/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date