2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 13, 2007 08:00 AM
Secretary of State

DOCUMENT # N05000001017

1. Entity Name
CREATED IN HIS IMAGE, INCORPORATED

Principal Place of Business	Mailing Address
613 HILL AVE. OCOEE, FL 34761	613 HILL AVE. OCOEE, FL 34761

DO NOT WRITE IN THIS SPACE

01/17/2007 No Chg-NP CR2E037 (4/06)

4. FEI Number
11-3756265

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, MAGGIE E
613 HILL AVE.
OCOEE, FL 34761

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8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE: Maggie Jones 7/9/07
Signature, typed or printed name of Registered Agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000768746
07/13/07-80010-015 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	KENNEY, WANDA M
STREET ADDRESS	613 HILL AVE.
CITY-ST-ZIP	OCOEE, FL 34761
TITLE	VD
NAME	KENNEY, ALBERT A
STREET ADDRESS	613 HILL AVE.
CITY-ST-ZIP	OCOEE, FL 34761
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wanda Kenney July 9, 2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #