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Secretary of State
04-09-2007 90035 017 ***150.00

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

4/9/

DOCUMENT # N05000008276

1. Entity Name
THE CREATIVE COOKS, INC.

Principal Place of Business	Mailing Address
4551 LONGSPUR DR SARASOTA, FL 34238	4551 LONGSPUR DR SARASOTA, FL 34238

02202007 No Chg-NP CR2E037 (4/06)

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4. FEI Number
59-3816168
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ANDERSON, JONATHAN T
3665 BEE RIDGE RD #300
SARASOTA, FL 34233

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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: _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

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

10. OFFICERS AND DIRECTORS

TITLE	DPS
NAME	PERRY, L. KENNETH
STREET ADDRESS	4551 LONGSPUR DR
CITY-ST-ZIP	SARASOTA, FL 34238
TITLE	DT
NAME	JONES, HERB
STREET ADDRESS	4274 BOCA POINTE DR
CITY-ST-ZIP	SARSOTA, FL 34238
TITLE	D
NAME	O'DONNELL, EDWARD
STREET ADDRESS	4382 OAK VIEW DR
CITY-ST-ZIP	SARASOTA, FL 34232
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: L. Kenneth Perry, President 4/19/07 941 923 9409
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #