

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24654

FILED
Mar 31, 2009
Secretary of State

Entity Name: CREATION STUDIES INSTITUTE, INC.

Current Principal Place of Business:

1001 W CYPRESS CREEK RD
STE 200
FORT LAUDERDALE, FL 33309 US

Current Mailing Address:

1001 W CYPRESS CREEK RD
STE 200
FORT LAUDERDALE, FL 33309 US

FEI Number: 65-0039668

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

1001 W CYPRESS CREEK RD
STE 220
FORT LAUDERDALE, FL 33309 US

New Mailing Address:

1001 W CYPRESS CREEK RD
STE 220
FORT LAUDERDALE, FL 33309 US

Name and Address of Current Registered Agent:

DEROSA, TOM
3847 NW 42 WAY
COCONUT CREEK, FL 33073 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: C () Delete
Name: DEROSA, TOM,
Address: 3847 NW 42ND WAY
City-St-Zip: COCONUT CREEK, FL 33073

Title: S () Delete
Name: ROWITT, STEVE
Address: 4135 NW 67TH WAY
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D () Delete
Name: DIPASQUALE, JAMES
Address: 4980 NW 55 STREET
City-St-Zip: POMPANO BEACH, FL 33073

Title: T () Delete
Name: BROWN, LADD JR
Address: 20810 RAMITA TRAIL
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: TUCKER, JEFF
Address: 5841 NE 20 TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D () Delete
Name: BROWN, JIM
Address: 1741 NE 58TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33334

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: THOMAS DEROSA

MR

03/31/2009

Electronic Signature of Signing Officer or Director

Date