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Jul 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N96000003409 (7)**

1. Corporation Name

(GOD'S) BLESSED CREATIONS, INC.

Principal Place of Business

4275 COQUINA CIR
APT #C
BRADENTON FL 34208

Mailing Address

4275 COQUINA CIR
APT #C
BRADENTON FL 34208

2. Principal Place of Business

21 Suite, Apt. #, etc. *Same*
22 City & State *Same*
23 Zip *Same*
24 Country *Same*

2a. Mailing Address

26 Suite, Apt. #, etc. *Same*
27 City & State *Same*
28 Zip *Same*
29 Country *Same*

3. Date Incorporated or Qualified

06/24/1996

4. FEI Number

65-0729733

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, BRENDA D
4275 COQUINA CIR
APT #C
BRADENTON FL 34208

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
D
MILLER, BRENDA
4275 COQUINA CIR APT #C
BRADENTON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
D
GRIFFIN, JANET
1812-19TH AVENUE WEST
PALMETTO FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
D
COBY, NATASHA
1275 CUNNINGHAM RD APT #1108
MARIETTA GA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
D
WASHINGTON, MIRANDA
503 S PARRAMORE ST APT #3
MADISON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
D
LANCE, TANYA
1049-113TH CHATHAM PINES CIR
WINTER SPRINGS FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP
D
HAYGOOD, HARRIET
6926-9TH COURT EAST
SARASOTA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Lance, Tanya
4589 N Valley Parkway
Smyrna, Georgia 30082

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Brenda Miller

6/28/98

(44) 1117 1118

CR2E037 (10/97)