## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P00000011275

1. Entity Name

CREATIVE INVESTMENTS, INC.



FILED
Jul 19, 2004 08:00 AM
Secretary of State

Principal Place of Business

9786 NORTHEAST 17TH PATH WILDWOOD, FL 34785 Mailing Address

9786 NORTHEAST 17TH PATH WILDWOOD, FL 34785



|--|--|

05062004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-3623005 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DRIGGERS, JERRY D 9786 NORTHEAST 17TH PATH WILDWOOD, FL 34785

SIGNATURES

## DO NOT WRITE IN THIS SPACE

| 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.   |  |   |  |      |   |  |  |
|---|--|---|--|------|---|--|--|
| StGNATUREStgnature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE  |  |   |  |      |   |  |  |
| FILE NOWIII FEE IS \$550.00<br>Due by September 8, 2004   |  | 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees |  |      |   |  |  |
| 10.   | OFFICERS AND DIRE  | CTORS ,   |  |      |   |  |  |
| title<br>name<br>street address<br>city-st-zip  | P<br>DRIGGERS, JERRY D<br>9786 NORTHEAST 17TH PATH<br>WILDWOOD, FL 34785 |   |  |      | U00000167:93<br>U7/19/04-88014-024 550.80 |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |  |   |  |      |   |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |   |  | DO   | NOT WRITE                                 |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |   |  | IN ' | THIS SPACE                                |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |   |  |      |   |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |   |  | · -  |   |  |  |
| 12. 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 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 807, 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. |  |   |  |      |   |  |  |