## **2008 FOR PROFIT CORPORATION**

## Feb 06, 2008 08:00 AN Secretary of State **ANNUAL REPORT DOCUMENT # P00000011275** 1. Entity Name CREATIVE INVESTMENTS, INC. Principal Place of Business Mailing Address 9786 NORTHEAST 17TH PATH 9786 NORTHEAST 17TH PATH WILDWOOD, FL 34785 WILDWOOD, FL 34785 No Cha-P CR2E034 (11/05) 01302008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3623005 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DRIGGERS, JERRY D DO NOT WRITE 9786 NORTHEAST 17TH PATH WILDWOOD, FL 34785 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. ٠. $\frac{\text{SIGNATURE}}{\sum_{i=1}^{n} \frac{1}{2^{n}} \sum_{i=1}^{n} \frac{1}{2^{n}} \text{Signature, typed or priviled name of registered agent and title if applicable$ (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE DRIGGERS, JERRY D NAME STREET ADDRESS 9786 NORTHEAST 17TH PATH CITY-ST-ZIP WILDWOOD, FL 34785 U00000817375 02/14/08-80090-010 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. Thereby 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 suppliemental 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 of trustee empowered to execute this report as required by Chapter 607, 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.

A131 118 1- 12

SIGNATURE: 🖄

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP . .

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**