2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P00000011315

1. Entity Name
CREATIVE BRICK LAYERS, INC.

Principal Place of Business	Mailing Address
1809 EL PASO TRAIL GULFBREEZE, FL 32563	1809 EL PASO TRAIL GULFBREEZE, FL 32563

DO NOT WRITE IN THIS SPACE

06122006   No Chg-P   CR2E034 (11/05)

4. FEI Number		Applied For
59-3630188		Not Applicable

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

6. Name and Address of Current Registered Agent

BERARD, CHERYL L
1809 EL PASO TRAIL
GULFBREEZE, FL 32563

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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 _Cheryl L Berard_   _June 12, 2006_
Signature typed or printed name of registered agent at the same case   (NOTE: Registered Agent's signature required when establishing)   DATE

FILE NOW!!! FEE IS $150.00 **Due by September 6, 2006**	**9.** Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10.   OFFICERS AND DIRECTORS

TITLE	D
NAME	BERARD, RAYMOND C
STREET ADDRESS	1809 EL PASO TRAIL
CITY-ST-ZIP	GULFBREEZE, FL 32563

TITLE	D
NAME	BERARD, CHERYL L
STREET ADDRESS	1809 EL PASO TRAIL
CITY-ST-ZIP	GULFBREEZE, FL 32563

TITLE	
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NAME	
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CITY-ST-ZIP	

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06/15/06-80001-009 158.75

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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 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.

SIGNATURE: _____ V.P. (Ray Berard, Vice Pres.) 12/06/2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #