

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 30, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P00000115475**1. Entity Name  
CREATIVE TECHNOLOGY SERVICES INC.

## Principal Place of Business

4707 WALDEN CIRCLE #405

ORLANDO  
32811

FL

## Mailing Address

4707 WALDEN CIRCLE #405

ORLANDO  
32811

FL

## 2. Principal Place of Business

4715 WALDEN CIRCLE #603

## 3. Mailing Address

4715 WALDEN CIRCLE #603

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

## City &amp; State

ORLANDO

FL

## City &amp; State

ORLANDO

FL

## 4. FEI Number

59-3692693

Applied For

Not Applicable

Zip  
32811

Country

Zip  
32811

Country

## 5. Certificate of Status Desired

☐**\$8.75** Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

PATTERSON VANNETTA  
4707 WALDEN CIRCLE #405ORLANDO  
32811

FL

## 7. Name and Address of New Registered Agent

## Name

PATTERSON VANNETTA

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

4715 WALDEN CIRCLE #603

## City

ORLANDO

FL

Zip Code  
32811

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.

SIGNATURE **VANNETTA PATTERSON**

04/30/2001

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME ROBINSON DONALD  
STREET ADDRESS 4707 WALDEN CIRCLE #405  
CITY-ST-ZIP ORLANDO FL 32811TITLE D ☐ Delete  
NAME PATTERSON VANNETTA  
STREET ADDRESS 4707 WALDEN CIRCLE #405  
CITY-ST-ZIP ORLANDO FL 32811TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition  
NAME ROBINSON DONALD  
STREET ADDRESS 4715 WALDEN CIRCLE #603  
CITY-ST-ZIP ORLANDO FL 32811TITLE D ☒ Change ☐ Addition  
NAME PATTERSON VANNETTA  
STREET ADDRESS 4715 WALDEN CIRCLE #603  
CITY-ST-ZIP ORLANDO FL 32811TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **VANNETTA PATTERSON**

D

04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)