


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90074 034 ***150.00

DOCUMENT # P02000097658 1. Entity Name CREATIVE KEYS, INC.					
Principal Place of Business 1602 VIRGINIA ST DUNEDIN, FL 34698			Mailing Address 1602 VIRGINIA ST DUNEDIN, FL 34698		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 27-0033576	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILKINSON, SMOLINSKY 1600 WALNUT STREET CLEARWATER, FL 33755			7. Name and Address of new Registered Agent Name: <u>SUSAN WILKINSON - SMOLINSKY</u> Street Address (P.O. Box Number is Not Acceptable) City: <u>FL</u> Zip Code:		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WILKINSON-SMOLINSKY, SUSAN G 213 N MISSOURI AVE CLEARWATER, FL 33755	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FAIR, HAYLEY 623 PINELAND AVE CLEARWATER, FL 33756	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D 	<input type="checkbox"/> Delete			
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <u>213 N. MISSOURI AVE</u>		
SIGNATURE: <u>Hayley Fair</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <u>4/5/07</u> Daytime Phone #: <u>727 743 8383</u>		

40062341



03192007 Chg-P CR2E034 (12/06)

4. FEI Number
27-0033576

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

WILKINSON, SMOLINSKY
1600 WALNUT STREET
CLEARWATER, FL 33755

*corrected,
not changed*

Name: SUSAN WILKINSON - SMOLINSKY
Street Address (P.O. Box Number is Not Acceptable)

City: FL Zip Code

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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STREET ADDRESS
CITY - ST - ZIP
D
WILKINSON-SMOLINSKY, SUSAN G
213 N MISSOURI AVE
CLEARWATER, FL 33755

☐ Delete

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CITY - ST - ZIP
213 N. MISSOURI AVE

☒ Change ☐ Addition

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☐ Delete

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SIGNATURE: Hayley Fair
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/5/07 Daytime Phone #: 727 743 8383