

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 02, 2003 8:00 am**  
**Secretary of State**

09-02-2003 90186 030 \*\*\*550.00

0010769 AV

**DOCUMENT # P02000101553**

**1. Entity Name**  
**STONE CREEK CREATIONS, INC.**



**Principal Place of Business**  
**2500 STONE CREEK WAY**  
**MOUNT DORA FL 32757**

**Mailing Address**  
**2500 STONE CREEK WAY**  
**MOUNT DORA FL 32757**



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

**4. FEI Number**

**30-0126164**

Applied For

Not Applicable

**5. Certificate of Status Desired** ☐

**\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**SUMMERS, GARY L ESQ**  
**380 W ALFRED ST**  
**TAVARES FL 32778**

Name

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

City

**FL**

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**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00**

**After September 10, 2003 Fee will be \$750.00**

**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**  
Trust Fund Contribution. ☐

**\$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 GORDON, TERRI L**  
**2500 STONE CREEK WAY**  
**MOUNT DORA FL 32757**

☐ Delete

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

☐ Change ☐ Addition

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☐ Change ☐ Addition

**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 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:**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**8/14/03**

Date

**352/383-1430**

Daytime Phone #

CR2E034 (4/03)

Attachment #  
**DRU M. BAKER**  
Certified Public Accountant

80142671  
PO2000101553

Post Office Box 748  
Mount Dora, FL 32756-0748

Tel. (352) 483-0009  
Fax (352) 357-9104

August 28, 2003

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Stone Creek Creations, Inc.  
FEI Number: 30-0126164

To Whom It May Concern:

Enclosed is the 2003 For Profit Corporation Uniform Business Report (UBR) for Stone Creek Creations, Inc. (FEI # 30-0126164). Stone Creek Creations, Inc. was just incorporated in September 2002. The original Uniform Business Report for Stone Creek Creations, Inc., which would have been due in May, was never received. Unfortunately, there have been some other problems with their mail service. The report was not filed by the May deadline because the form was not received and it was not realized that it was due, since this is a new corporation. A check in the amount of \$550 is enclosed with the report. However, we are asking that the additional \$400 that has been paid because it is after the May deadline, be refunded due to the circumstances.

Thank you for your cooperation. If you should have any questions, please call me at the number above.

Sincerely yours,



Dru M. Baker

cc: Terri Gordon