

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000118518

FILED  
Apr 28, 2003  
Secretary of State

Entity Name: CREATIVE TECHNOLOGIES OF NORTH FLORIDA, INC.

**Current Principal Place of Business:**

528 CUNNINGHAM HOLLOW WAY  
JACKSONVILLE, FL 32259

**New Principal Place of Business:**

1946 PARENTAL HOME RD  
SUITE B  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

528 CUNNINGHAM HOLLOW WAY  
JACKSONVILLE, FL 32259

**New Mailing Address:**

FEI Number: 57-1136225      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LEE BAER, LAURA  
528 CUNNINGHAM HOLLOW WAY  
JACKSONVILLE, FL 32259

**Name and Address of New Registered Agent:**

BAER, LAURA LEE  
528 CUNNINGHAM HOLLOW WAY  
JACKSONVILLE, FL 32259

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: LAURA LEE BAER      04/28/2003  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BAER, LAURA L  
Address: 528 CUNNINGHAM HOLLOW WAY  
City-St-Zip: JACKSONVILLE, FL 32259

Title: S ( ) Delete  
Name: WADE, DANIEL K  
Address: 528 CUNNINGHAM HOLLOW WAY  
City-St-Zip: JACKSONVILLE, FL 32259

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LAURA LEE BAER      P      04/28/2003  
Electronic Signature of Signing Officer or Director      Date