

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 15, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000041612

1. Entity Name  
GOD'S CREATURES, INC.



Principal Place of Business  
1851 LAKEWOOD RANCH BLVD  
LAKEWOOD RANCH, FL 34211

Mailing Address  
1851 LAKEWOOD RANCH BLVD  
LAKEWOOD RANCH, FL 34211



04142008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 57-1164637	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> X	\$8.75 Additional Fee Required

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

SOOKRA, NEVILLE E  
1851 LAKEWOOD RANCH BLVD  
LAKEWOOD RANCH, FL 34211

**DO NOT WRITE  
IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

U000000898983  
04/28/08-80020-013 158.75

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOOKRA, NEVILLE E 1851 LAKEWOOD RANCH BLVD LAKEWOOD RANCH, FL 34211
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SOOKRA, SUSAN A 1851 LAKEWOOD RANCH BLVD LAKEWOOD RANCH, FL 34211
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**DO NOT WRITE  
IN THIS SPACE**

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: Neville E. Sookra (NEVILLE E. SOOKRA) 04/14/08 941-744-2373  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #