


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 29, 2005 08:00 AM
Secretary of State

DOCUMENT # P03000099896 1. Entity Name CREATIVE WRITING STRATEGIES, INC.	
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Principal Place of Business 8930 STATE ROAD 84, SUITE 299 DAVIE, FL 33324	Mailing Address 8930 STATE ROAD 84, SUITE 299 DAVIE, FL 33324
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01182005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 14-1901739	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent EISENSMITH, JEFFREY R P.A. ONE FINANCIAL PLAZA, SUITE 1600 FORT LAUDERDALE, FL 33394

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V ORTON, CHARLOTTE 1112 NW 79TH DR. PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST VOGT-STRAUSS, FRAN 9380 OAK GROVE CIR. DAVIE, FL 33328
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P JACKSON, SANDRA 8217 NW 15TH CT. PLANTATION, FL 33322
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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01/29/05-80028-018 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: FRAN VOGT-STRAUSS SEC. / TREAS. 1/29/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #