


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2008 08:00 AM
Secretary of State

DOCUMENT # P05000032151

1. Entity Name
SISTERS CREATIONS AND SUCH, INC.



| | |
|---|---|
| Principal Place of Business 1321 E. OLIVE ROAD PENSACOLA, FL 32514 US | Mailing Address POST OFFICE BOX 6097 PENSACOLA, FL 32503 US |
|---|---|

DO NOT WRITE IN THIS SPACE



01162008 No Chg-P CR2E034 (11/05)

| | |
|---|---------------------------------------|
| 4. FEI Number 20-2485003 | 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

JONES, FRANCES A
1321 E. OLIVE ROAD
PENSACOLA, FL 32514

**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 _____

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

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P/D JONES, FRANCES A 1321 E. OLIVE ROAD PENSACOLA, FL 32514 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ST/D EMMONS, BEVERLY O 4724 PEBBLE CREEK TERR. PENSACOLA, FL 32526 |
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04/07/08-80017-014 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the 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: *Frances A. Jones* **FRANCES A. JONES** *President* **March 18, 2008** **850-991-6580**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #