

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000039638

FILED
Apr 08, 2009
Secretary of State

Entity Name: CSI. CREATIVE SOLUTIONS INC.

Current Principal Place of Business:

110 WHALER DRIVE
MELBOURNE BEACH, FL 32951 US

New Principal Place of Business:

Current Mailing Address:

757 HILLPINE TERRACE N.E.
ATLANTA, GA 30306 US

New Mailing Address:

FEI Number: 52-2455150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DALY, MICHAEL
Address: 110 WHALER DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: D () Delete
Name: DALY, MICHAEL
Address: 110 WHALER DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: V () Delete
Name: PATRICK, SCOTT
Address: 757 HILLPINE TERRACE NE
City-St-Zip: ATLANTA, GA 30306

Title: S () Delete
Name: JOSE, CAROL
Address: 3220 RIVER VILLA WAY #115
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: T () Delete
Name: JOSE, CAROL
Address: 3220 RIVER VILLA WAY #115
City-St-Zip: MELBOURNE BEACH, FL 32951

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 exemption stated 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 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: MICHAEL DALY

P

04/08/2009

Electronic Signature of Signing Officer or Director

Date