

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000075683

Entity Name: CREATIVE POWER, INC.

FILED
Apr 28, 2006
Secretary of State

Current Principal Place of Business:

15345 NW 194TH STREET
LAKE BUTLER, FL 32054 US

New Principal Place of Business:

Current Mailing Address:

15345 NW 194TH STREET
LAKE BUTLER, FL 32054 US

New Mailing Address:

FEI Number: 74-3147843

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EAVES, LEN E MR.
238 S. WALNUT ST
STARKE, FL 32091 US

Name and Address of New Registered Agent:

EAVES, LEN E MR.
18919 US 301 NORTH
STARKE, FL 32091 US

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: LEN E. EAVES

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EAVES, DONNA L MRS.
Address: 15345 NW 194TH ST
City-St-Zip: LAKE BUTLER, FL 32054 US

Title: VP () Delete
Name: EAVES, LEN E MR.
Address: 15345 NW 194TH ST
City-St-Zip: LAKE BUTLER, FL 32054

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 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: LEN E. EAVES

VP

04/28/2006

Electronic Signature of Signing Officer or Director

Date