2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000035170

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Entity Name: CREATIVE PROCESS COMMUNICATIONS, INC.

FILED Jul 01, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5 PINE LOOK PASS 53 SHADOWCREEK WAY ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174

Current Mailing Address: New Mailing Address:

53 SHADOWCREEK WAY **5 PINE LOOK PASS** ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174

FEI Number: 20-8684167 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LABONTE, JENNIFER LABONTE, JENNIFER 5 PINE LOOK PASS 53 SHADÓWCREEK WAY ORMOND BEACH, FL 32174 US ORMOND BEACH, FL 32174 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: JENNIFER LABONTE 07/01/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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Title: PST () Delete Title: (X) Change () Addition LABONTE, JENNIFER LABONTE, JENNIFER Name: Name: **5 PINE LOOK PASS** 53 SHADOWCREEK WAY Address: Address:

City-St-Zip: ORMOND BEACH, FL 32174 City-St-Zip: ORMOND BEACH, FL 32174

Title: Title: (X) Change () Addition () Delete LABONTE, WILLIAM LABONTE, WILLIAM Name: Name: **5 PINE LOOK PASS** Address: 53 SHADOWCREEK WAY Address: ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174 City-St-Zip: 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: JENNIFER LABONTE **PRES** 07/01/2008