

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90519 001 ***300.00

DOCUMENT # P95000056068

1. Entity Name
CREATIVE FIELDS, INC.



Principal Place of Business
**3200 HENDERSON BLVD.
SUITE 100
TAMPA, FL 33609 US**

Mailing Address
**3200 HENDERSON BLVD.
SUITE 100
TAMPA, FL 33609 US**

66408463



03082004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3328904

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HESSEMER, ERIC
1624 STORINGTON AVENUE
BRANDON, FL 33511**

**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 _____

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, 2004 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	D HESSEMER, CHARLES 3200 WEST FIELDER STREET TAMPA, FL 33611
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HESSEMER, GREGORY 3613 HORATIO STREET TAMPA, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD HESSEMER, ERIC 1624 STORINGTON AVE. TAMPA, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
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)(i), 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eric C. Hessemer 03/26/04

Date

813/870-6800

Daytime Phone #