2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000076614

NAPLES, FL 34109

City-St-Zip:

Entity Name: CREATIONS OF NAPLES, INC.

FILED Apr 15, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5151 HOCHIN ST 5151 HOUCHIN ST NAPLES, FL 34109 NAPLES, FL 34109 US US **Current Mailing Address: New Mailing Address:** 6511 SABLE RIDGE LN NAPLES, FL 34109 US FEI Number: 65-0692094 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: JENKINS, SCOTT 6511 SABLE RIDGE LN NAPLES, FL 34109 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition JENKINS, SCOTT Name: Name: 6511 SABLE RIDGE LN Address: Address: City-St-Zip: NAPLES, FL 34109 City-St-Zip: Title: DST () Delete Title: () Change () Addition Name: JENKINS, PAMELA Name: 6511 SABLE RIDGE LN Address: Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SCOTT JENKINS **PRES** 04/15/2004