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FILED

Mar 06 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000084858 (5)

1. Corporation Name

CUSTOM CARD CREATIONS, INC.



Principal Place of Business

2524 GOLF DR  
PALATKA FL 32178

Mailing Address

P O BOX 2021  
PALATKA FL 32178-2021

3. Date Incorporated or Qualified

10/11/1996

3a. Date of Last Report

2. Principal Place of Business

21 Rt 1 Box 4605

2a. Mailing Address

26 P.O. Box 1151

4. FEI Number

59-3402619

Applied For

Not Applicable

Suite, Apt. #, etc.

22 201 Comer Road

Suite, Apt. #, etc.

27

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

City & State

23 Palatka, FL

City & State

28 Palatka, FL

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

Zip

24 32177

Country

25 Putnam

Zip

29 32178-1151

Country

30 Putnam

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

MORGAN, HELEN R  
2524 GOLF DR  
PALATKA FL 32178

10. Name and Address of New Registered Agent

81 Name

Debra F Comer

82 Street Address (P.O. Box Number is Not Acceptable)

Rt 1 Box 4605

83 City

Palatka

84 State

FL

85 Zip Code

32177

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Debra F. Comer

(NOTE: Registered Agent signature required when reinstating)

3/3/97

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT	<input checked="" type="checkbox"/> DELETE
NAME	MORGAN, HELEN R.	
STREET ADDRESS	2524 Golf Dr.	
CITY-ST-ZIP	PALATKA, FL 32178	
TITLE	SECY. TREASURER	<input checked="" type="checkbox"/> DELETE
NAME	ALICE BEUTEIN	
STREET ADDRESS	P.O. Box 210	
CITY-ST-ZIP	E. PALATKA, FL. 32131	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MARY A. TURNER	
1.3 STREET ADDRESS	1606 MOSELEY AVE.	
1.4 CITY-ST-ZIP	PALATKA, FL. 32177	
2.1 TITLE	Vice President, & Secy Treas	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	DEBRA F. COMER	
2.3 STREET ADDRESS	Rt 1, Box 4605, 201 Comer Rd.	
2.4 CITY-ST-ZIP	PALATKA, FL. 32177	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mary A. Turner  
MARY A. TURNER

Date

3/3/97

Daytime Phone

904/328-4848

CR2E034 (9/96)