

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000098460

FILED
Jan 15, 2008
Secretary of State

Entity Name: CREAACTIVE, INC.

Current Principal Place of Business:

1422 HENDRY STREET
STE 301
FORT MYERS, FL 33901 US

Current Mailing Address:

1422 HENDRY STREET
STE 301
FORT MYERS, FL 33901 US

New Principal Place of Business:

1412 DEAN STREET
STE 300
FORT MYERS, FL 33901 US

New Mailing Address:

1412 DEAN STREET
STE 300
FORT MYERS, FL 33901 US

FEI Number: 65-0743467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWALD, SUSANNE
1422 HENDRY STREET STE 301
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

SCHWALD, SUSANNE
1412 DEAN STREET
STE 300
FORT MYERS, FL 33901 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:

01/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BECHTOLD, ARMIN
Address: 1427 BARCELONA AVE
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: SCHWALD, SUSANNE
Address: 1427 BARCELONA AVE
City-St-Zip: FORT MYERS, FL 33901

Title: D () Delete
Name: BECHTOLD, HORST
Address: 3614 CITRUS STREET
City-St-Zip: ST. JAMES CITY, FL 33956

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: SUSANNE SCHWALD

D

01/15/2008

Electronic Signature of Signing Officer or Director

Date