2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

5/3

FILED
Jun 02, 2004 8:00 am
Secretary of State
05-03-2004 91049 032 ***150.00

DOCUMENT # P97000099910

1. Entity Name

CREED MERCHANDISING, INC.

66425894

MOORE CR2E034 (11/03)

Principal Place of Business	Mailing Address
2813 S. HIAASSEE RD. SUITE 204 ORLANDO FL 32835	2813 S. HIAASSEE RD. SUITE 204 ORLANDO FL 32835

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 77-0476037 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MCNEELY, ROBERT A ESQ.
MCFARLAIN, WILEY, CASSEDY & JONES, P.A.
215 SOUTH MONROE ST., STE. 600
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name GARRY WHITFIELD

Street Address (P.O. Box Number is Not Acceptable) 2813 S. Hiawassee Rd.

Suite 304

City Orlando FL Zip Code 32835

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] 4/20/04
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
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STAPP, SCOTT C/O JHMP, 15 S. ORANGE AVE. ORLANDO FL 32801	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 2813 S. HIAWASSEE Rd, Ste 304 ORLANDO, FL 32835
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD TREMONTI, MARK C/O JHMP, 15 S. ORANGE AVE. ORLANDO FL 32801	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO WHITFIELD, GARRY D 15 S ORANGE AVENUE ORLANDO FL 32801	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SCOTT PHILLIPS 2813 S. HIAWASSEE Rd, Ste 304 ORLANDO, FL 32835 SECRETARY ☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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] 4/27/04 407 644 2572
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #