## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000035110

Name:

Address:

City-St-Zip:

16191 N.W. 57TH AVENUE

MIAMI, FL 33014

FILED Jan 18, 2005 Secretary of State

Entity Name: CREATIVE ASSET PROTECTION	STRATEGIES, INC.
Current Principal Place of Business:	New Principal Place of Business:
16191 NW 57TH AVE. MIAMI, FL 33014	
Current Mailing Address:	New Mailing Address:
16191 NW 57TH AVE. MIAMI, FL 33014	
FEI Number: 65-0804118 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:	
SOUTHWELL, DAVID W 16191 NW 57TH AVE. MIAMI, FL 33014 US	
The above named entity submits this statement for in the State of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered	d Agent Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: D ( ) Delete Name: SOUTHWELL, DAVID W	Title: DP (X) Change ( ) Addition Name: SOUTHWELL, DAVID W

16191 NW 57TH AVE. Address: 16191 NW 57TH AVE. Address: City-St-Zip: MIAMI, FL 33014 City-St-Zip: MIAMI, FL 33014 Title: () Delete Title: (X) Change ( ) Addition

SOUTHWELL, SUSAN W SOUTHWELL, SUSAN W Name: Name: Address: 16191 NW 57TH AVE. Address: 16191 NW 57TH AVE. MIAMI, FL 33014 MIAMI, FL 33014 City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete () Change () Addition MEAD, PATRICIA A

Name: 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: DAVID W. SOUTHWELL DP 01/18/2005