

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22000075454

Entity Name: CREATORS OFFSHORE INC.**Current Principal Place of Business:**7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702**Current Mailing Address:**7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NORTHWEST REGISTERED AGENT LLC
7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	WASHBURN, LOREN
Address	449 CANYON ESTATES DRIVE
City-State-Zip:	BOUNTIFUL UT 84010

Title	SECRETARY
Name	WASHBURN, SHULE
Address	7901 4TH ST N STE 300
City-State-Zip:	ST. PETERSBURG FL 33702

Title	TREASURER
Name	WASHBURN, SHULE
Address	7901 4TH ST N STE 300
City-State-Zip:	ST. PETERSBURG FL 33702

Title	DIRECTOR
Name	WASHBURN, LOREN
Address	449 CANYON ESTATES DRIVE
City-State-Zip:	BOUNTIFUL UT 84010

I hereby 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 all other like empowered.

SIGNATURE: LOREN WASHBURN

PRESIDENT

05/11/2023

Electronic Signature of Signing Officer/Director Detail_____
Date