2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# F01000002747

Entity Name: THE TEMPLE OF THE CELESTIAL ORDER INC.

Current Principal Place of Business:

9311 CAMDEN AVE.
OMAHA, NE 68134

New Principal Place of Business:

Current Mailing Address:

9311 CAMDEN AVE.
OMAHA, NE 68134

New Mailing Address:

FEI Number: 47-0822351 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLAUSER, CAROL REV.
7310 SOUTH CYPRESSHEAD DRIVE
PARKLAND, FL 33067 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GLAUSER, VICKIE REV.
Address: 7310 SOUTH CYPRESSHEAD DRIVE
City-St-Zip: PARKLAND, FL 33067

Title: VP ( ) Delete
Name: GLAUSER, CAROL REV.
Address: 7310 SOUTH CYPRESSHEAD DRIVE
City-St-Zip: PARKLAND, FL 33067

Title: S ( ) Delete
Name: BRIDGES, KIM
Address: 4361 E. SANTOVITO RD.
City-St-Zip: PAHRUMP, NV 89048

Title: D ( ) Delete
Name: BRIDGES, RANDAL
Address: 4361 E. SANTOVITO RD.
City-St-Zip: PAHRUMP, NV 89048

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL GLAUSER VP 04/30/2007

Electronic Signature of Signing Officer or Director Date