2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F01000002747

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Entity Name: THE TEMPLE OF THE CELESTIAL ORDER INC.

Current Principal Place of Business: New Principal Place of Business:

9311 CAMDEN AVE. OMAHA, NE 68134

Current Mailing Address: New Mailing Address:

9311 CAMDEN AVE. OMAHA, NE 68134

FEI Number: 47-0822351 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:

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

GLAUSER, CAROL REV.
2102 LUCAYA BEND # G-1
COCONUT CREEK, FL 33066 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: REV. CAROL GLAUSER 11/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: GLAUSER, VICKIE REV. Name: GLAUSER, VICKIE REV.

Address: 7310 SOUTH CYPRESSHEAD DRIVE Address: 2102 LUCAYA BEND # G-1
City-St-Zip: PARKLAND, FL 33067 City-St-Zip: COCONUT CREEK, FL 33066

Title: VP () Delete Title: VP/S (X) Change () Addition Name: GLAUSER, CAROL REV. Name: GLAUSER, CAROL REV S D Address: 7310 SOUTH CYPRESSHEAD DRIVE Address: 2102 LUCAYA BEND # G-1

City-St-Zip: PARKLAND, FL 33067 City-St-Zip: COCONUT CREEK,, FL 33066

Title: S () Delete Title: ALT (X) Change () Addition
Name: BRIDGES, KIM
Name: BRIDGES, KIM
Address: 4364 F. SANTOVITO RD

 Address:
 4361 E. SANTOVITO RD.
 Address:
 4361 E. SANTOVITO ST

 City-St-Zip:
 PAHRUMP, NV 89048
 City-St-Zip:
 PAHRUMP, NV 89048

 Name:
 BRIDGES, RANDAL
 Name:
 BRIDGES, RANDAL

 Address:
 4361 E. SANTOVITO RD.
 Address:
 4361 E. SANTOVITO ST.

 City-St-Zip:
 PAHRUMP, NV 89048
 City-St-Zip:
 PAHRUMP, NV 89048

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: REV. CAROL L GLAUSER S/D 11/29/2009