

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001119

Entity Name: CELEBRATION NONRESIDENTIAL OWNERS ASSOCIATION, INC.**FILED**
Jan 09, 2017
Secretary of State
CC1313053940**Current Principal Place of Business:**851 CELEBRATION AVE
CELEBRATION, FL 34747**Current Mailing Address:**851 CELEBRATION AVE
CELEBRATION, FL 34747 US**FEI Number: 59-3390328****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LARSEN & ASSOCIATES, P.A.
300 S. ORANGE AVE.
STE 1200
ORLANDO, FL 32801 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	VP
Name	RIMMER, TODD
Address	851 CELEBRATION AVENUE
City-State-Zip:	CELEBRATION FL 34747

Title	PRES
Name	PIERCE, PAGE P
Address	851 CELEBRATION AVENUE
City-State-Zip:	CELEBRATION FL 34747

Title	SECRETARY
Name	THRASH, HENRY
Address	851 CELEBRATION AVE
City-State-Zip:	CELEBRATION FL 34747

Title	DIRECTOR
Name	NUNEZ, MIKE
Address	851 CELEBRATION AVE
City-State-Zip:	CELEBRATION FL 34747

Title	DIRECTOR
Name	MCGUIRL-HADLEY, JOY
Address	851 CELEBRATION AVE
City-State-Zip:	CELEBRATION FL 34747

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

SIGNATURE: PAGE PIERCE**PRESIDENT****01/09/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date