

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001641

FILED
Jan 04, 2008
Secretary of State

Entity Name: CELEBRATION COMMUNITY CHURCH OF NAPLES, INC.

Current Principal Place of Business:

65 -12TH STREET SOUTH
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

65 - 12TH STREET SOUTH.
NAPLES, FL 34102

New Mailing Address:

FEI Number: 65-0900789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, JAMES E
5070 - TALLYWOOD WAY
NAPLES, FL 34116 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: D () Delete
Name: SCOTT, JAMES E
Address: 5070 - TALLYWOOD WAY
City-St-Zip: NAPLES, FL 34116

Title: D () Delete
Name: MEFFORD, GORDIE
Address: 6928 MAUNA LOA LANE
City-St-Zip: NAPLES, FL 34113

Title: D () Delete
Name: RAKER, JOHN
Address: 535 14TH SOUTH
City-St-Zip: NAPLES, FL 34102

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:

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: SHIRLEY SCOTT

BKPR

01/04/2008

Electronic Signature of Signing Officer or Director

Date