## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N0000003500

Sep 05, 2002 Secretary of State

FILED

Entity Name: CELEBRATION SPEECH AND DEBATE BOOSTERS, INC.

**New Principal Place of Business: Current Principal Place of Business:** 618 TEAL AVENUE CELEBRATION, FL 34747 US **Current Mailing Address: New Mailing Address:** 618 TEAL AVENUE CELEBRATION, FL 34747 US FEI Number: 59-3662983 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: HABER, LAWRENCE H 931 JAŚMINE STREET KISSIMMEE, FL 34747 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition HARMER, BARBARA AVERILL, KATHY Name: Name: 601 TRUMPET PLACE Address: 420 GREENBRIER AVE Address: City-St-Zip: CELEBRATION, FL 34747 City-St-Zip: CELEBRATION, FL 34747 Title: TD Title: (X) Change ( ) Addition ( ) Delete MUMEY, SARA Name: MUMEY, JACKSON Name: Address: 618 TEAL AVENUE Address: 618 TEAL AVENUE City-St-Zip: CELEBRATION, FL 34747 City-St-Zip: CELEBRATION, FL 34747 Title: () Delete Title: SD (X) Change ( ) Addition DOMINGUEZ, DINA MEEKS ERLICH, LARRY Name: Name: 618 TEAL AVENUE 317 CELEBRATION BLVD Address: Address: City-St-Zip: CELEBRATION, FL 34747 City-St-Zip: CELEBRATION, FL 34747 Title: Title: () Change () Addition ( ) Delete Name: HABER, TERRI Name: Address: 931 JASMINE STREET Address: City-St-Zip: CELEBRATION, FL 34747 City-St-Zip: Title: () Delete Title: VD ( ) Change (X) Addition ERLICH, BONNIE Name: Name: 317 CELEBRATION BLVD Address: Address: City-St-Zip: City-St-Zip: CELEBRATION, FL 34747 Title: () Delete Title: ( ) Change (X) Addition BUSHEY, JOHN Name: Name: Address: Address: 510 CAMPUS ST CELEBRATION, FL 34747 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JACKSON MUMEY TREA 09/05/2002