

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000003500

FILED
Jan 06, 2003
Secretary of State

Entity Name: CELEBRATION SPEECH AND DEBATE BOOSTERS, INC.

Current Principal Place of Business:

618 TEAL AVENUE
CELEBRATION, FL 34747 US

New Principal Place of Business:

Current Mailing Address:

618 TEAL AVENUE
CELEBRATION, FL 34747 US

New Mailing Address:

FEI Number: 59-3662983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HABER, LAWRENCE H
931 JASMINE STREET
KISSIMMEE, FL 34747 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: PD () Delete
Name: AVERILL, KATHY
Address: 420 GREENBRIER AVE
City-St-Zip: CELEBRATION, FL 34747

Title: TD () Delete
Name: MUMEY, JACKSON
Address: 618 TEAL AVENUE
City-St-Zip: CELEBRATION, FL 34747

Title: SD () Delete
Name: ERLICH, LARRY
Address: 317 CELEBRATION BLVD
City-St-Zip: CELEBRATION, FL 34747

Title: D () Delete
Name: HABER, TERRI
Address: 931 JASMINE STREET
City-St-Zip: CELEBRATION, FL 34747

Title: VD () Delete
Name: ERLICH, BONNIE
Address: 317 CELEBRATION BLVD
City-St-Zip: CELEBRATION, FL 34747

Title: D () Delete
Name: BUSHEY, JOHN
Address: 510 CAMPUS ST
City-St-Zip: CELEBRATION, FL 34747

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
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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 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

TD

01/06/2003

Electronic Signature of Signing Officer or Director

Date