

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005627

FILED
Apr 29, 2004
Secretary of State**Entity Name:** CELEBRATE ANNA MARIA, INC.**Current Principal Place of Business:**217 PINE AVENUE
ANNA MARIA, FL 34216**New Principal Place of Business:****Current Mailing Address:**PO BOX 516
ANNA MARIA, FL 34216**New Mailing Address:****FEI Number:** 65-1039439**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HILL, JAY
304 HARDIN AVENUE
PO BOX 516
ANNA MARIA, FL 34216**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:** PSTD () Delete
Name: CIMINO, JASON
Address: 519 PINE AVE
City-St-Zip: ANNA MARIA, FL 34216**Title:** VD () Delete
Name: HILL, JANET E
Address: 304 HARDIN AVE
City-St-Zip: ANNA MARIA, FL 34216**Title:** D () Delete
Name: HILL, JAY
Address: 304 HARDIN AVE
City-St-Zip: ANNA MARIA, FL 34216**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 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: JASON CIMINO

PRES

04/29/2004

Electronic Signature of Signing Officer or Director

Date