

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 09, 2006 08:00 AM
Secretary of State**

DOCUMENT # N01000000553		
1. Entity Name CELEBRATE LIFE, INC.		
Principal Place of Business 1920 SW 72ND ST GAINESVILLE, FL 32607	Mailing Address P.O. BOX 14423 GAINESVILLE, FL 32604	
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent WOODHULL, ANGELA V 1920 SW 72ND STREET GAINESVILLE, FL 32607		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept, the obligations of registered agent. SIGNATURE: <i>Angela V. Woodhull</i> DATE: <i>March 7, 2006</i> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WOODHULL, ANGELA V 1920 SW 72ND STREET GAINESVILLE, FL 32607	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VST WOODHULL, JENNIFER 3216 HOLLIDAY AVENUE APOPKA, FL 32703	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAGANIERE, LAUREL 3216 HOLLIDAY AVENUE APOPKA, FL 32703	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>Angela V. Woodhull</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<i>3/7/06 333-0881</i> Date Daytime Phone



03062006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-3091981

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional
Fee Required

U00000480(20)
03/20/06-60023-004 70.00

**DO NOT WRITE
IN THIS SPACE**