

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000005401

FILED
May 22, 2003
Secretary of State

Entity Name: CELEBRATION ENTREPRENEURS ORGANIZATION INC.

Current Principal Place of Business:

1001 CELEBRATION AVE #209
CELEBRATION, FL 34747

New Principal Place of Business:

Current Mailing Address:

1001 CELEBRATION AVE #209
CELEBRATION, FL 34747

New Mailing Address:

FEI Number: 05-0523033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, BARTON
1016 CENTERGATE BLVD EAST
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

ANDERSON, BARTON
949 WEST PARK DR.
207
CELEBRATION, 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: BARTON ANDERSON

05/22/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ANDERSON, BARTON
Address: 1016 CENTERGATE BLVD EAST
City-St-Zip: CELEBRATION, FL 34747

Title: D () Delete
Name: DAVIDSON, PHILIP
Address: 1001 CELEBRATION AVE #209
City-St-Zip: CELEBRATION, FL 34747

Title: D () Delete
Name: MYERS, DAVID
Address: 1025 MAIDEN TERRACE
City-St-Zip: CELEBRATION, FL 34747

Title: D (X) Delete
Name: BURSON, SHANNON
Address: 721 FRONT STREET #202
City-St-Zip: CELEBRATION, FL 34747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ANDERSON, BARTON
Address: 949 WESTPARK DR. #207
City-St-Zip: CELEBRATION, FL 34747

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: PHILIP T. DAVIDSON

D

05/22/2003

Electronic Signature of Signing Officer or Director

Date