2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2005 8:00 am
Secretary of State
02-23-2005 90086 045 ****61.25

DOCUMENT # N02000009872

1. Entity Name
JOSEPH SIMON CELY MINISTRIES INC.

20015454

Principal Place of Business	Mailing Address
4690 SUSSEX TERRACE ORLANDO, FL 32811	4690 SUSSEX TERRACE ORLANDO, FL 32811

DO NOT WRITE IN THIS SPACE

02072005 No Chg-NP CR2E037 (10/03)

4. FEI Number
02-0666839
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CELY, ROSEMONDE
4731 CHEVY PL
ORLANDO, FL 32811

Cely, Rosemonde
114 Rich Drive
Palm Springs, FL
33406

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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.

N/A

SIGNATURE _____ DATE
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, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CELY, JOSEPH S
STREET ADDRESS	4690 SUSSEX TERRACE
CITY-ST-ZIP	ORLANDO, FL 32811
TITLE	D
NAME	CELY, JEFF S — He Resigned
STREET ADDRESS	4690 SUSSEX TERRACE
CITY-ST-ZIP	ORLANDO, FL 32811
TITLE	D
NAME	CELY, ROSEMONDE — Cely Rosemonde 114 Rich Drive Palm Springs, FL 33406
STREET ADDRESS	4690 SUSSEX TERRACE
CITY-ST-ZIP	ORLANDO, FL 32811
TITLE	D
NAME	OCTAVIEN, LUC L
STREET ADDRESS	9108 LAKE LOTTA CIRCLE
CITY-ST-ZIP	GOTHA, FL 34734
TITLE	D
NAME	Charles, Elionor
STREET ADDRESS	6074 Gamble Drive
CITY-ST-ZIP	Orlando, FL 32808
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph S. Cely 02-16-05 (407)648-9269
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT 02-16-05

Note: 20015454

We Have a new mailing Address.

It is:

Joseph Simon Coly Ministries, Inc.
P.O. Box 20974
West Palm Beach, FL 33416-0974

Joseph S. Coly
president

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