## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000003461

Entity Name: CELESTIAL CHURCH OF CHRIST WORLDWIDE, INC.

## FILED Apr 20, 2004 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
9652 HOOD ROAD JACKSONVILLE, FL 3225	57			
Current Mailing Address:		New Mailing Address:		
9652 HOOD ROAD JACKSONVILLE, FL 32257				
FEI Number: 59-3150241	FEI Number Applied For()	FEI Number Not Applicable()	Certificate of Status Desired()	
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
SHONEKAN, GODWIN B 9652 HOOD ROAD JACKSONVILLE, FL 32257		SHONEKAN, GODWIN B REV. 9652 HOOD ROAD JACKSONVILLE, FL 32257		

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: REV. G. BOLANLE SHONEKAN			04/20/2004	
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	9652 HOOD ROAD	Title: Name: Address: City-St-Zip:	9652 HOOD ROAD	
Title: Name: Address: City-St-Zip:		Title: Name: Address: City-St-Zip:	9652 HOOD ROAD	
Title: Name: Address: City-St-Zip:	9652 HOOD ROAD	Title: Name: Address: City-St-Zip:	9652 HOOD ROAD	
Title: Name: Address: City-St-Zip:	D ( ) Delete ZAGADOU, LOIUS 9652 HOOD ROAD JACKSONVILLE, FL 32257	Title: Name: Address: City-St-Zip:	9652 HOOD ROAD	
Title: Name: Address: City-St-Zip:		Title: Name: Address: City-St-Zip:		
Title: Name: Address: City-St-Zip:	9652 HOOD ROAD	Title: Name: Address: City-St-Zip:	9652 HOOD ROAD	

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:	REV. G. BOLANLE SHONEKAN	CTD	04/20/2004
	Electronic Signature of Signing Officer or Director		Date

OSHOKOYA, RASHEED /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

ABIOLA, NIYI /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

OKAISABOR, E. K. /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

JOB, C. T. MILTON /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

OMACHONU, JOHN O. /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

AKANDE, EMMANUEL /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

OMOTOSO, JOROTOM /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

HASSTRUP, ADEMOLA /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

AFOLAHAN /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

JACOB, C. OLUREMI /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

OGUNREMI, J. O. /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

AJIBIKE, BOLA /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

WILLIAMS, V. B. /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

OPALEYE, EKUNDAYO B. /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257

DARAMOLA, F. /DIRECTOR 9652 HOOD ROAD JACKSONVILLE, FL. 32257