# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 01, 2009**
**Secretary of State**

DOCUMENT# N03000006457

**Entity Name:** CELESTIAL CHURCH OF CHRIST IBUKUN ORISUN IYE PARISH, INC.

**Current Principal Place of Business:**

5621 COMMERCE STREET
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

**Current Mailing Address:**

5621 COMMERCE STREET
JACKSONVILLE, FL 32211 US

**New Mailing Address:**

**FEI Number: 74-3100194** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

**Name and Address of Current Registered Agent:**

ODUWOLE, OLA
2352 ROGERO ROAD
JACKSONVILLE, FL 32211 US

**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: PD ( ) Delete
Name: SHONIYI, ADEREMI
Address: 7265 U.S. OPEN BLVD
City-St-Zip: JACKSONVILLE, FL 32277

Title: VPD ( ) Delete
Name: ODEDIRAN, DAVID
Address: 2930 STONEMONT ST., #49W
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD ( ) Delete
Name: ODUWOLE, OLA
Address: 1222 WESTDALE DR.
City-St-Zip: JACKSONVILLE, FL 32211

Title: TD ( ) Delete
Name: SHONIYI, ADEBUKONLA A
Address: 7265 U.S. OPEN BLVD
City-St-Zip: JACKSONVILLE, FL 32277

Title: ASD ( ) Delete
Name: OWOLABI, OLUTUNDE K
Address: 7265 U.S. OPEN BLVD
City-St-Zip: JACKSONVILLE, FL 32277

**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:

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 exemption stated 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 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: OLA ODUWOLE SD 05/01/2009

Electronic Signature of Signing Officer or Director — Date