

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000011059

FILED
Mar 01, 2007
Secretary of State

Entity Name: NEW CREATION CELEBRATION, INC.

Current Principal Place of Business:

1002 FRENCH AVENUE
SANFORD, FL 32771

New Principal Place of Business:

2516 OTIS AVENUE
DELTONA, FL 32738

Current Mailing Address:

1002 FRENCH AVENUE
SANFORD, FL 32771

New Mailing Address:

2516 OTIS AVENUE
DELTONA, FL 32738

FEI Number: 05-0593584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURNS, DEBRA A
1002 FRENCH AVENUE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

BURNS, DEBRA A
2516 OTIS AVENUE
DELTONA, FL 32738 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: _____

03/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MUSCARELLA, DEBRA
Address: 497 SUNLAKE CIRCLE #103
City-St-Zip: LAKE MARY, FL 327746

Title: D () Delete
Name: BURNS, STEVE
Address: 497 SUNLAKE CIRCLE #103
City-St-Zip: LAKE MARY, FL 32746

Title: SD () Delete
Name: BROGAN, MICHELLE
Address: 27003 FIREBUSH DR.
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D () Delete
Name: BROGAN, ALEC
Address: 27003 FIREBUSH DR.
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: TD () Delete
Name: MUSCARELLA, ELIZABETH J
Address: 13 ESCONDIDO COURT #128
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BURNS, DEBRA
Address: 2516 OTIS AVENUE
City-St-Zip: DELTONA, FL 32738

Title: D (X) Change () Addition
Name: BURNS, STEVE
Address: 2516 OTIS AVENUE
City-St-Zip: DELTONA, FL 32738

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: MUSCARELLA, FRANK D
Address: 13 ESCONDIDO COURT
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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 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: DEBRA BURNS

D

03/01/2007

Electronic Signature of Signing Officer or Director

Date