

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005563

FILED
May 03, 2005
Secretary of State

Entity Name: CELESTIAL CHURCH OF CHRIST, FLORIDA DISTRICT INC.

Current Principal Place of Business:

255 SW 27TH AVENUE
DAVIE, FL 33312

New Principal Place of Business:

Current Mailing Address:

P. O BOX 611871
NORTH MIAMI, FL 33261

New Mailing Address:

FEI Number: 27-0055520 **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:

Name and Address of New Registered Agent:

SHOYOYE, JUSTUS
255 SW 27TH AVENUE
DAVIE, FL 33312 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OSCHOFFA, EMMANUEL M REV.
Address: 255 SW 27TH AVENUE
City-St-Zip: DAVIE, FL 33312

Title: D () Delete
Name: SHOYOYE, JUSTUS EVANG.
Address: 255 SW 27TH AVENUE
City-St-Zip: DAVIE, FL 33312

Title: D. () Delete
Name: OSHOKOYA, RASHEED EVANG.
Address: 255 SW 27TH AVENUE
City-St-Zip: DAVIE, FL 33312

Title: S () Delete
Name: SALVADOR, ISAAC LDR.
Address: 255 SW 27TH AVENUE
City-St-Zip: DAVIE, FL 33312

Title: T () Delete
Name: ARMSTRONG,
Address: 255 SW 27TH AVENUE
City-St-Zip: DAVIE, FL 33312

Title: D (X) Delete
Name: HASSAN, MICHAEL EVANG.
Address: 255 SW 27TH AVENUE
City-St-Zip: DAVIE, FL 33312

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: D (X) Change () Addition
Name: HASSAN, MICHAEL EVANG.
Address: 255 SW 27TH AVENUE
City-St-Zip: DAVIE, FL 33312

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: SHOYOYE JUSTUS

D

05/03/2005

Electronic Signature of Signing Officer or Director

Date