2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002595

FILED May 09, 2009 Secretary of State

Entity Name: CELESTIAL CHURCH OF CHRIST, TAMPA PARISH ONE INC.

	rincipal Place of Business:	New Principal Place of Business:	
802 N. 34 AMPA, F			
urrent N	lailing Address:	New Mailing Ad	ldress:
802 N. 34 AMPA, F			
accordan	ce with s. 607.193(2)(b), F.S., the corporation did not rec	•	() Certificate of Status Desired ()
	I Address of Current Registered Agent:	Name and Addi	ess of New Registered Agent:
0305 BO	IN, ABIKE YETTE CREEK BLVD W, FL 33569 US		
	named entity submits this statement for the purpo e of Florida.	ose of changing its reg	istered office or registered agent, or both,
IGNATUI	RE:		
	Electronic Signature of Registered Agent		Date
FFICER	S AND DIRECTORS:	ADDITIONS/CH	ANGES TO OFFICERS AND DIRECTOR
tle: ame: ddress: ity-St-Zip:	D () Delete FALIBUYAN, ABIKE 10305 BOYETTE CREEK BLVD RIVERVIEW, FL 33569 US	Title: Name: Address: City-St-Zip:	() Change () Addition
le: ime: ldress:	D () Delete AKINTOLA, FLORENCE 1613 PROWMORE DR BRANDON, FL 33511 US	Title: Name: Address: City-St-Zip:	() Change () Addition
y-St-∠ip:			
le: me: dress:	D () Delete OLADAPO, KEHINDE 5904 N. 20TH ST TAMPA, FL 33610 US	Title: Name: Address: City-St-Zip:	() Change () Addition
le: ume: dress: ty-St-Zip: le: ume: le: ume: ldress: ty-St-Zip:	OLADAPO, KEHINDE 5904 N. 20TH ST	Name: Address:	() Change () Addition () Change () Addition
le: me: dress: y-St-Zip: le: me: dress:	OLADAPO, KEHINDE 5904 N. 20TH ST TAMPA, FL 33610 US D () Delete ADEGBOLA, YETUNDE 1603 PROWMORE DR	Name: Address: City-St-Zip: Title: Name: Address:	

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: FELIX OGBEIFUN D 05/09/2009