

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005458

FILED  
Mar 30, 2009  
Secretary of State

Entity Name: UNITED PARISH OF CELEBRATION, INC.

**Current Principal Place of Business:**

510 CAMPUS ST., CELEBRATION SCHOOL  
CELEBRATION SCHOOL CAFETERIA  
CELEBRATION, FL 34747

**New Principal Place of Business:**

510 CAMPUS ST., CELEBRATION SCHOOL  
CELEBRATION SCHOOL CAFETERIA  
CELEBRATION, FL 34747 US

**Current Mailing Address:**

P.O. BOX 470522  
CELEBRATION, FL 34747

**New Mailing Address:**

P.O. BOX 470522  
CELEBRATION, FL 34747 US

FEI Number: 82-0560502

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVIS, JAMES H. DR.  
603 NADINA PLACE  
CELEBRATION, FL 34747 US

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

DAVIS, JAMES H DR.  
603 NADINA PLACE  
CELEBRATION, FL 34747 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: JAMES H. DAVIS

03/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: LARSON, DON  
Address: 223 CELBRATION BLVD.  
City-St-Zip: CELEBRATION, FL 34747

Title: T ( ) Delete  
Name: JAEHRLING, KARLHEINZ MR.  
Address: 500 MIRASOL CIR., #202  
City-St-Zip: CELEBRATION, FL 34747

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: T (X) Change ( ) Addition  
Name: LARSON, DON MR.  
Address: 223 CELBRATION BLVD.  
City-St-Zip: CELEBRATION, FL 34747 US

Title: T (X) Change ( ) Addition  
Name: JAEHRLING, KARLHEINZ MR.  
Address: 500 MIRASOL CIR., #202  
City-St-Zip: CELEBRATION, FL 34747 US

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: JAMES H. DAVIS

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03/30/2009

Electronic Signature of Signing Officer or Director

Date