## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000005554

**FILED** Apr 16, 2008 Secretary of State

Entity Name: CELEBRATION OFFICE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

215 CELEBRATION PLACE STE 500 1420 CELEBRATION BLVD CELEBRATION, FL 34747

SUITE 200

CELEBRATION, FL 34747

**Current Mailing Address:** New Mailing Address:

215 CELEBRATION PLACE STE 500 1420 CELEBRATION BLVD CELEBRATION, FL 34747 SUITE 200

CELEBRATION, FL 34747

FEI Number: 26-1549683 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

BRITO & YOUNG, PLC 2199 PONCE DE LEON BLVD STE 200 CORAL GABLES, FL 33134

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**OFFICERS AND DIRECTORS:** 

(X) Change ( ) Addition () Delete

LA ROAS, ANDREW LA ROSA, ANDREW Name: Name:

215 CELEBRATION PLACE STE 500 Address: 1420 CELEBRATION BLVD, SUITE 200 Address:

City-St-Zip: CELEBRATION, FL 34747 City-St-Zip: CELEBRATION, FL 34747

Title: DS () Delete Title: (X) Change ( ) Addition MELISSINOS, DEANA

Name: MELISSINOS, DEANA Name: Address: 215 CELEBRATION PLACE STE 500 Address:

1420 CELEBRATION BLVD. SUITE 200

City-St-Zip: CELEBRATION, FL 34747 City-St-Zip: CELEBRATION, FL 34747

Title: () Delete Title: (X) Change ( ) Addition LA ROSA, JOSEPHE Name: LA ROSA, JOSEPH Name:

215 CELEBRATION PLACE STE 500 1420 CELEBRATION BLVD. SUITE 200 Address: Address:

City-St-Zip: CELEBRATION, FL 34747 City-St-Zip: CELEBRATION, FL 34747

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: JOE LAROSA DT 04/16/2008