

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012255

FILED
Apr 05, 2009
Secretary of State

Entity Name: CELEBRATION OF LIFE MINISTRIES, INC.

Current Principal Place of Business:

281 LIGHTHOUSE COVE COURT
#103
OCOE, FL 34761 US

New Principal Place of Business:

Current Mailing Address:

2582 S. MAGUIRE ROAD
#147
OCOE, FL 34761

New Mailing Address:

281 LIGHTHOUSE COVE COURT
#103
OCOE, FL 34761 US

FEI Number: 26-1854038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRANT, RICHARD W
281 LIGHTHOUSE COVE COURT
APT. 103
OCOE, FL 34761 US

Name and Address of New Registered Agent:

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: GRANT, RICHARD W
Address: 2582 S. MAGUIRE ROAD #147
City-St-Zip: OCOE, FL 34761 US

Title: VP () Delete
Name: GRANT, FRANCES A
Address: 2582 S. MAGUIRE ROAD #147
City-St-Zip: OCOE, FL 34761 US

Title: T () Delete
Name: DECAUL, BRYAN
Address: 2582 S. MAGUIRE ROAD #147
City-St-Zip: OCOE, FL 34761 US

Title: S () Delete
Name: JONES, RENA
Address: 2582 S. MAGUIRE ROAD #147
City-St-Zip: OCOE, FL 34761 US

Title: MEMB () Delete
Name: DECAUL, MICHELLE
Address: 2582 S. MAGUIRE ROAD, #147
City-St-Zip: OCOE, FL 34761

Title: MEMB () Delete
Name: JONES, HARRY
Address: 2582 S. MAGUIRE ROAD, #147
City-St-Zip: OCOE, FL 34761

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
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Address:
City-St-Zip:

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

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

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: RICK GRANT

P

04/05/2009

Electronic Signature of Signing Officer or Director

Date