

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41177

FILED
Mar 05, 2012
Secretary of State

Entity Name: CELEBRATION COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1120 CELEBRATION CT.
ST. JOHNS, FL 32259 US

New Principal Place of Business:

Current Mailing Address:

1120 CELEBRATION CT.
ST. JOHNS, FL 32259 US

New Mailing Address:

FEI Number: 59-3041202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEET, RICHARD D
1240 CELEBRATION COURT
ST. JOHNS, FL 32259 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: ST
Name: ROCKENBACH, MARGUERITTE
Address: 1120 CELEBRATION CT.
City-St-Zip: ST. JOHNS, FL 32259

Title: DP
Name: ROCKENBACH, J.L.
Address: 1120 CELEBRATION CT.
City-St-Zip: ST. JOHNS, FL 32259

Title: D
Name: LEET, RUTH
Address: 1240 CELEBRATION CT.
City-St-Zip: ST. JOHNS, FL 32259

Title: D
Name: BROOKS, MARSHA
Address: 1220 CELEBRATION CT.
City-St-Zip: ST. JOHNS, FL 32259

Title: D
Name: BANE, FAY
Address: 1205 SPENCER LANE.
City-St-Zip: ST. JOHNS, FL 32259

Title: D
Name: COOPER III, JOHN
Address: 1200 CELEBRATION CT.
City-St-Zip: ST. JOHNS, FL 32259

I hereby 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 all other like empowered.

SIGNATURE: MARGUERITTE ROCKENBACH

S/T

03/05/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date