

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 12, 2007 08:00 AM
Secretary of State

DOCUMENT # N42752

1. Entity Name
CELEBRATE AMERICA, INC.



Principal Place of Business
**POST OFFICE BOX 12413
TALLAHASSEE, FL 32317-2413**

Mailing Address
**POST OFFICE BOX 12413
TALLAHASSEE, FL 32317-2413**



02062007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3065563	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**MCCORD, GUYTE P III
210 SOUTH MONROE STREET
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *x Guyte P. McCord III*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

02/08/07
DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD EDWARDS, ASHLEY 912 MYERS PARK DRIVE TALLAHASSEE, FL 32301
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BUBSEY, JANICE A 3069 O'BRIEN DRIVE TALLAHASSEE, FL 32309
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BUBSEY, WILLIAM E 3069 O'BRIEN DRIVE TALLAHASSEE, FL 32309
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHAPMAN, DAVID 912 MEYERS PARK DRIVE TALLAHASSEE, FL 32301
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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02/22/07-80003-009 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Janice A. Bubsey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 7, 2007
Date

Daytime Phone #