FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

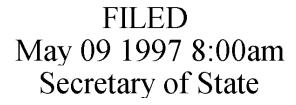
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9300000171 (9)

CELEBRITY CHARITABLE EVENTS INC.

Principal Place of Business

Mailing Address





1044 PONTE VEDRA BLVD. PONTE VEDRA FL 32082			1044 PONTE VEDRA BLVD. PONTE VEDRA FL 32082-4015							
						3. Date Incorporated or Qualified 01/13/1993	3a. Da	10 of Las 10/07/1	t Report 996	
2. Principal	Place of Business	2a. Mailing Addi	2a. Mailing Address			4. FEI Number 59-3198687	· · · · · · · · · · · · · · · · · · ·		Applied For	
21		26				38-3 190007		40.5	Not Applicable	
Suite, Ap		27				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Sta 23	ate	City & State	 			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country Z ₁ p 25 29			Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address	of Current Registered Agent				10. Name and Address of New Re	gistered .	Agent		
				81	Name					
	iton, james r III Onte vedra blvd.				Street Add	ddress (P.O. Box Number is Not Acceptable)				
	VEDRA FL 32082		83							
				84	City		FL	85 Z	ip Code	
11. Pursuar office o	nt to the provisions of Section registered agent, or both, in	s 617,0502 and 617,1508, Flori the State of Florida, Such char	da Statutes, the ge was authori	abov ized b	e-named corpora	poration submits this statement for the pation's board of directors. I hereby accept	urpose of ot the app	changin ointment	g its registered as registered	
		the olympations of thection 617.	0503, Florida S	tatule	S.	4/	15-1	97		
SIGNATURE	nature, types of printer name	onStered agent and title II applicable.	(NOTE: Regist	tered Ag	uper erutangia tne	ired when reinstating)	DATE	· /		
12,		CERS AND DIRECTORS	1			ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	D CTOOLTON LANGE	□ DI		1 TITLE	ļ			☐ Chan	ge 🔲 Addition	
NAME	STOCKTON, JAMES I 1044 PONTE VEDRA			2 NAME	T 4000505					
STREET ADDRESS CITY-ST-ZIP	PONTE VEDRA FL 32082		1	1.3 \$TREET ADDRESS 1.4 \$TTY - ST - ZIP						
TITLE				2.1 TITLE				Chan	ge [] Addition	
NAME	BELLINGRATH, BRAD	_ 	2.2 M							
STREET ADDRESS	1044 PONTE VEDRA	BLVD.	2.3	3 STREE	1 ADDRESS					
CITY-ST-ZIP	PONTE VEDRA FL 32			4 CITY-	S1-24P					
TITLE	D	□ DI		1 TITLE				Chan	ge [_] Addition	
NAME	WILLIAMSON, TIM	Bu an	■ ⁻	2 NAME						
STREET ADDRESS	I 1044 PONTE VEDRA PONTE VEDRA FL 32				T ADDRESS					
CITY-ST-ZIP TITLE	FUNIE YEUNA I E 32	DI DI		4. ÇITY- 1 TITLE	SI-ZIP			Chan	ge L Addition	
NAME		<u></u>		2 NAME				C. Online	gs <u>—1 1.00men</u>	
STREET ADDRESS	S				T ADDRESS					
CITY-ST-ZIP			4.	4 QIY-:	ST-ZIP					
TITLE		Di	LETE 5.	1 TITLE				☐ Chan	ge Addition	
NAME			5	2 NAME						
STREET ADDRESS	s		5.	3 STREE	T ADDRESS					
CITY-ST-ZIP				4 CITY-	ST-ZIP					
TITLE		□ Di	P **	1 TITLE				Chan	ge 🔲 Addition	
NAME	.\			2 NAME	1 400bcc					
STREET ADDRESS	8				T ADDRESS					
CITY-ST-ZIP	1		6.	4 CITY-:	S1-ZIP					

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or an attachment with an address.

41,0100

CONSTUDE.