


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90227 021 ****61.25

DOCUMENT # N97000006775	
1. Entity Name CELEBRATION TABERNACLE, INC.	

Principal Place of Business 1150 W KING ST COCOA FL 32922	Mailing Address 35 GRANDVIEW BLVD COCOA FL 32922
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2. Principal Place of Business 1010 Dixon Blvd.	3. Mailing Address P.O. Box 56
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Cocoa, FL	City & State Cocoa, FL
Zip 32922	Zip 32923
Country USA	Country USA

4. FEI Number 59-3494133	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

1st MOORE CR2E037 (10/05)



6. Name and Address of Current Registered Agent BECKFORD, ERROL 35 GRANDVIEW BOULEVARD COCOA FL 32922	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

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	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BECKFORD, KIM 35 GRANDVIEW BLVD COCOA FL 32922 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PICKELTON, TERRI 1119 MANATEE DR ROCKLEDGE FL 32955 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANKENFIELD, BRUCE 5365 FISHTAIL PALM AVE COCOA FL 32926 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLACK, EDDIE LUCAS LANE COCOA FL 32922 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRANKENFIELD, TRACY 5365 FISHTAIL PALM AVE COCOA FL 32926 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ← incorrect BECKFORD, ERROL 35 GRANDVIEW BLVD COCOA FL 32922 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER DEBI McGoldrick 4325 Beacon Ave Titusville, FL 32996 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR Buddy Parrish 7430 N. Cocoa Blvd. Cocoa, FL 32927 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ERROL Beckford 35 GRANDVIEW BLVD. COCOA, FL 32922 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 *Kim M Beckford* 325-06 321-28-000