

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002746

FILED
Jun 03, 2012
Secretary of State

Entity Name: THE ORDER OF CELTIC BENEDICTINES, INC.

Current Principal Place of Business:

ANAMCARA DEI ABBEY CHANCERY
85447 BLACKMON ROAD
YULEE, FL 32097

New Principal Place of Business:

ANAMCARA DEI ABBEY CHANCERY
85447 BLACKMON ROAD
YULEE, FL 32097 UN

Current Mailing Address:

ANAMCARA DEI ABBEY CHANCERY
85447 BLACKMON ROAD
YULEE, FL 32097

New Mailing Address:

ANAMCARA DEI ABBEY CHANCERY
85447 BLACKMON ROAD
YULEE, FL 32097 UN

FEI Number: 59-3511269

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUCKANS, CHARLOTTE R
ANAMCARA DEI ABBEY
85447 BLACKMON RD.
YULEE, FL 32097 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: PD
Name: BUCKANS, CHARLOTTE R
Address: 85447 BLACKMON ROAD
City-St-Zip: YULEE, FL 32097

Title: VD
Name: BUCKANS, WILLIAM C
Address: 85447 BLACKMON RD
City-St-Zip: YULEE, FL 32097

Title: SD
Name: RUSSELL, SHIRLEY M
Address: 5125 W. 107TH ST.
City-St-Zip: JACKSONVILLE, FL 32244

Title: SD
Name: OGLESBY, FRANCES
Address: 85242 BLACKMON ROAD
City-St-Zip: YULEE, FL 32097

Title: TD
Name: OGLESBY, JIMMY D
Address: 85242 BLACKMON ROAD
City-St-Zip: YULEE, FL 32097

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: CHARLOTTE R BUCKANS

PD

06/03/2012

Electronic Signature of Signing Officer or Director

Date