

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000049689

FILED  
Sep 06, 2005  
Secretary of State

Entity Name: CELEBRATIONS UNLIMITED, INC.

## Current Principal Place of Business:

4646 DOMESTIC AVE  
STE 102  
NAPLES, FL 34104

## New Principal Place of Business:

3776 ARNOLD AVENUE  
NAPLES, FL 34104

## Current Mailing Address:

1688 MORNING SUN LANE  
NAPLES, FL 34119

## New Mailing Address:

3776 ARNOLD AVENUE  
NAPLES, FL 34104

FEI Number: 59-3092835

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BERRY, JON M  
4646 DOMESTIC AVE  
STE 102  
NAPLES, FL 34104 US

## Name and Address of New Registered Agent:

BERRY, JON M  
3776 ARNOLD AVENUE  
NAPLES, FL 34104 US

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: JON M. BERRY

09/06/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BERRY, JON M  
Address: 4646 DOMESTIC AVE  
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Delete  
Name: BERRY, KATHLEEN  
Address: 1688 MORNING SUN LANE  
City-St-Zip: NAPLES, FL 34119

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BERRY, JON M  
Address: 3776 ARNOLD AVENUE  
City-St-Zip: NAPLES, FL 34104

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JON M. BERRY

P

09/06/2005

Electronic Signature of Signing Officer or Director

Date