

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000108155

FILED  
Jan 06, 2008  
Secretary of State

Entity Name: CELEBRATION ADVENTURE GOLF, INC.

## Current Principal Place of Business:

2261 MAINSAIL COVE  
KISSIMMEE, FL 34746

## New Principal Place of Business:

6073 WEST IRLO BRONSON MEMORIAL HIGHWAY  
KISSIMMEE, FL 34747

## Current Mailing Address:

2261 MAINSAIL COVE  
KISSIMMEE, FL 34746

## New Mailing Address:

6073 WEST IRLO BRONSON MEMORIAL HIGHWAY  
KISSIMMEE, FL 34747

FEI Number: 20-5916104

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEE, SCOTT  
2261 MAINSAIL COVE  
KISSIMMEE, FL 34746 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P/D ( ) Delete  
Name: LEE, SCOTT  
Address: 2261 MAINSAIL COVE  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: VP/D ( ) Delete  
Name: LEE, BRYAN  
Address: 2261 MAINSAIL COVE  
City-St-Zip: KISSIMMEE, FL 34746 US

Title: S/D ( ) Delete  
Name: DANNEN, DOUG  
Address: 5566 BROOKLINE DRIVE  
City-St-Zip: ORLANDO, FL 32819 US

Title: T/D ( ) Delete  
Name: DEMATTIO, DEAN  
Address: 141 NORTH GATE ROAD  
City-St-Zip: MYRTLE BEACH, SC 29572 US

Title: D ( ) Delete  
Name: ZITO, KENNETH  
Address: 138 WEST BERLIN  
City-St-Zip: BOLTON, MA 01740

Title: D ( ) Delete  
Name: CONTINI, MICHAEL  
Address: 1474 TERRACE ROAD N.W.  
City-St-Zip: NEW PHILADELPHIA, OH 44663

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SCOTT LEE

PRES

01/06/2008

Electronic Signature of Signing Officer or Director

Date