

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # P98000052112	
1. Entity Name CELEBRITY HOUSE OF NAPLES, INC.	

Principal Place of Business 1661 OLD HENDERSON RD. COLUMBUS, OH 43220	Mailing Address 1661 OLD HENDERSON RD. COLUMBUS, OH 43220
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DO NOT WRITE IN THIS SPACE



04182006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3517303	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SIESKY, JAMES H 1000 TAMiami TrL N STE 201 NAPLES, FL 34102
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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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000001542724 05/10/06-80109-013 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HAZELBAKER, RALPH 1661 OLD HENDERSON RD. COLUMBUS, OH 43220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HAZELBAKER, BILLIE 1661 OLD HENDERSON RD. COLUMBUS, OH 43220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S EVERETT, SHARON A 1661 OLD HENDERSON RD. COLUMBUS, OH 43220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EVENSON, K. ROBERT JR. 1661 OLD HENDERSON RD. COLUMBUS, OH 43220
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:  4/26/06	DATE: 4/26/06	CAYMAN PHASE: ☐
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		