

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005754

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** ANGELIC ADOPTIONS, INC.

**Current Principal Place of Business:**

1122 THIRD STREET STE 8  
NEPTUNE BEACH, FL 32266

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 51246  
JACKSONVILLE BEACH, FL 322401246

**New Mailing Address:**

FEI Number: 20-5875492

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOSSETT, KIMBERLY A  
1122 THIRD STREET STE 8  
NEPTUNE BEACH, FL 32266 US

**Name and Address of New Registered Agent:**

SARDARI, LUDMILA A  
1122 THIRD STREET  
SUITE 8  
NEPTUNE BEACH, FL 32266 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: LUDMILA SARDARI

04/28/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FRANCIS, CHARLENE  
Address: P.O. BOX 51246  
City-St-Zip: JACKSONVILLE BEACH, FL 322401246

Title: D  
Name: SARDARI, LUDMILA A  
Address: P.O. BOX 51246  
City-St-Zip: JACKSONVILLE BEACH, FL 322401246

Title: D  
Name: LEARCH, SHARON S  
Address: P.O. BOX 51246  
City-St-Zip: JACKSONVILLE BEACH, FL 322401246

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: CHARLENE FRANCIS

D

04/28/2010

Electronic Signature of Signing Officer or Director

Date