

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90082 036 ****61.25



DOCUMENT # N97000003825
1. Entity Name
GUARDIAN ANGELS FOR SPECIAL POPULATIONS, INC.

Principal Place of Business: **400 SANTA BARBARA BLVD
CAPE CORAL FL 33915**
Mailing Address: **P.O. BOX 151321
CAPE CORAL FL 33915**



MOORE CR2E037 (11/03)

2. Principal Place of Business: Suite, Apt. #, etc.

3. Mailing Address: Suite, Apt. #, etc.

City & State

4. FEI Number: **65-0769068**
Applied For: Not Applicable:

City & State

Zip: Country

Country

Zip: Country

Country

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**SANSONE, SARA
400 SANTA BARBARA BLVD
CAPE CORAL FL 33915**

7. Name and Address of New Registered Agent
Name: _____
Street Address (P.O. Box Number is Not Acceptable): _____
City: _____ **FL** Zip Code: _____

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: _____

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD
NAME: BRADY, ANNETTE
STREET ADDRESS: 760 CORAL DR
CITY-ST-ZIP: CAPE CORAL FL 33904 Delete

TITLE: D
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____ Change Addition

TITLE: D
NAME: VAVROCH, RONALD
STREET ADDRESS: 21 SE 23RD AVE
CITY-ST-ZIP: CAPE CORAL FL 33990 Delete

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____ Change Addition

TITLE: SD
NAME: ZWIRELEIN, LYNETTE
STREET ADDRESS: 229 SW 43RD ST
CITY-ST-ZIP: CAPE CORAL FL 33914 Delete

TITLE: D
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____ Change Addition

TITLE: VD
NAME: PISKORZ, GARBABARA
STREET ADDRESS: 1230 SE 2ND ST.
CITY-ST-ZIP: CAPE CORAL FL 33990 Delete

TITLE: SD
NAME: PISKORZ, BARBARA
STREET ADDRESS: _____
CITY-ST-ZIP: _____ Change Addition

TITLE: TD
NAME: SALVATORE, D'AGOSTINO
STREET ADDRESS: 5231 SEMINOLE CT.
CITY-ST-ZIP: CAPE CORAL FL 33904 Delete

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____ Change Addition

TITLE: D
NAME: ROMANO, ANTHONY
STREET ADDRESS: 4420 COUNTRY CLUB BLVD.
CITY-ST-ZIP: CAPE CORAL FL 33904 Delete

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____ Change Addition

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

SIGNATURE: *Salvatore D'Agostino* **SALVATORE D'AGOSTINO** 4-1-04 239-541-1195
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment ADDITIONS - GUARDIAN ANGELS FOR
SPECIAL POPULATIONS

TITLE: PD

NAME: ROBERT DOUGLAS # ~~97000003825~~ DOCUMENT # 97000003825
ADDRESS: 11946 PRINCE CHARLES COURT FBI # 65-0769068
CAPE CORAL, FL 33991

TITLE: VPD

NAME: STEVE MASTER
ADDRESS: 1717 SE 7TH ST
CAPE CORAL, FL 33990

TITLE: D

NAME: ARLENE VAVROCH
ADDRESS: 21 SE 23RD AVE.
CAPE CORAL, FL 33990

TITLE: D

NAME: ELLEN RDMANO
4420 COUNTRY CLUB BLVD
CAPE CORAL, FL 33904

TITLE: D

NAME: JUNITA BARNES
ADDRESS: 28 NE 20TH AVE.
CAPE CORAL, FL 33909

TITLE: D

NAME: REBA DATTOLICO
11550 DEAL ROAD
N. FT. MYERS, FL 33917