

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003825

FILED
Jan 26, 2012
Secretary of State

Entity Name: GUARDIAN ANGELS FOR SPECIAL POPULATIONS, INC.

Current Principal Place of Business:

400 SANTA BARBARA BLVD
CAPE CORAL, FL 33915

New Principal Place of Business:

410 SANTA BARBARA BLVD
CAPE CORAL, FL 33915

Current Mailing Address:

P.O. BOX 151321
CAPE CORAL, FL 33915

New Mailing Address:

FEI Number: 65-0769068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANSONE, SARA
400 SANTA BARBARA BLVD
CAPE CORAL, FL 33915 US

Name and Address of New Registered Agent:

SANSONE, SARA
410 SANTA BARBARA BLVD
CAPE CORAL, FL 33915 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: _____ 01/26/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MARCUCCI, VINCENT
Address: 845 MONTICELLO COURT
City-St-Zip: CAPE CORAL, FL 33904

Title: TD
Name: SMITH, SHARON
Address: 5900 TARPON GDNS CR #102
City-St-Zip: CAPE CORAL, FL 33914

Title: VP
Name: ZWIRELEIN, LYNETTE
Address: 229 SW 43RD ST
City-St-Zip: CAPE CORAL, FL 33914

Title: SD
Name: MOREN, KATHLEEN
Address: 3419 SE 4TH AVENUE
City-St-Zip: CAPE CORAL, FL 33904

Title: D
Name: RIZZO, AL
Address: 2546 SW 27TH AVENUE
City-St-Zip: CAPE CORAL, FL 33914

Title: D
Name: HAUGH, MARGIE
Address: 1124 SW 46TH STREET
City-St-Zip: CAPE CORAL, FL 33914

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: SHARON L. SMITH TD 01/26/2012
Electronic Signature of Signing Officer or Director Date