

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000002890

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** TOUCHED BY HEAVENLY ANGELS, INC

**Current Principal Place of Business:**

6255 S. WILLIAMSON BLVD  
APT. 1327  
PORT ORANGE, FL 32128

**New Principal Place of Business:**

**Current Mailing Address:**

6255 S. WILLIAMSON BLVD  
APT. 1327  
PORT ORANGE, FL 32128

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WIGGINS, LILLIE G  
6255 S. WILLIAMSON BLVD  
APT. 1327  
PORT ORANGE, FL 32128 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WIGGINS, LILLIE G  
Address: 6255 S. WILLIAMSON BLVD  
City-St-Zip: PORT ORANGE, FL 32128 US

Title: VP  
Name: TAYLOR, SAMANTHA G  
Address: 6255 S. WILLIAMSON BLVD  
City-St-Zip: PORT ORANGE, FL 32128 US

Title: TREA  
Name: WIGGINS, JOSHUA R SR.  
Address: 6255 S. WILLIAMSON BLVD  
City-St-Zip: PORT ORANGE, FL 32128 US

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: LILLIE G. WIGGINS

P

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date