

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000006233

Entity Name: CONSTRUCTION ANGELS, INC.**Current Principal Place of Business:**2436 N. FEDERAL HIGHWAY SUITE 313
LIGHTHOUSE POINT, FL 33064**Current Mailing Address:**2436 N. FEDERAL HIGHWAY SUITE 313
LIGHTHOUSE POINT, FL 33064 US**FEI Number:** 45-3044158**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**FRIEDMAN, MICHAEL J
2385 N.W. EXECUTIVE CENTER DRIVE SUITE 100
BOCA RATON, FL 33431 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GIBBS, KRISTI
Address 2436 N. FEDERAL HIGHWAY
 SUITE 313
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title AUTHORIZED AGENT
Name FRIEDMAN, MICHAEL ESQ.
Address 2385 N.W. EXECUTIVE CENTER
 DRIVE
 SUITE 100
City-State-Zip: BOCA RATON FL 33431

Title CA ORLANDO GOLF DIRECTOR
Name LENEIS, CARL
Address 2436 N. FEDERAL HIGHWAY SUITE
 313
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title CHAIRMAN
Name JOYCE, CHRIS
Address 2436 N. FEDERAL HIGHWAY SUITE
 313
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title ASST. TREASURER, |DIRECTOR OF
 OPERATIONS
Name MCCLOSKEY, JENNIFER L
Address 2436 N. FEDERAL HIGHWAY SUITE
 313
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title CA MD/DC/DE DIRECTOR
Name WOOLBRIGHT, KEVIN
Address 2436 N. FEDERAL HIGHWAY SUITE
 313
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title MI DIRECTOR
Name GRAHAM, LEE
Address 2436 N. FEDERAL HIGHWAY SUITE
 313
City-State-Zip: LIGHTHOUSE POINT FL 33064

Title CA FL DIRECTOR
Name THRASHER, THOMAS
Address 2436 N. FEDERAL HIGHWAY SUITE
 313
City-State-Zip: LIGHTHOUSE POINT FL 33064

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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: JENNIFER L MCCLOSKEY

ASST. TREASURER

02/10/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SALLES, AUGUSTO
Address 2730 SOUTH FALKENBURG ROAD
City-State-Zip: RIVERVIEW FL 33578

Title DIRECTOR
Name RECKNER, NEIL
Address 2800 FOSTORIA AVE
City-State-Zip: FINDAY FL 45840