

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000007761

Entity Name: ANGEL SNUGS, INC.**Current Principal Place of Business:**5863 COBBLESTONE LANE
UNIT F105
NAPLES, FL 34112**Current Mailing Address:**5863 COBBLESTONE LANE
UNIT F105
NAPLES, FL 34112 US**FEI Number:** 45-3189836**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**FARRUGIA, ANGELA M
5863 COBBLESTONE LANE
UNIT F105
NAPLES, FL 34112 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	P
Name	FARRUGIA, ANGELA M
Address	5863 COBBLESTONE LANE UNIT F105
City-State-Zip:	NAPLES FL 34112
Title	DIR
Name	RUBIN, TABITHA L
Address	2650 MISSOURI AVENUE
City-State-Zip:	ST CLOUD FL 34769
Title	VP, T
Name	MENENDEZ, REGINA E
Address	380 HAMMOCK DUNES PLACE
City-State-Zip:	ORLANDO FL 32828
Title	DIR
Name	SEIFERTH, BRANDYN
Address	5122 HAWKSTONE DRIVE
City-State-Zip:	SANFORD FL 32771

Title	DIR, S
Name	AGUILAR, MARIANA
Address	17961 SW 11TH CT
City-State-Zip:	PEMBROKE PINES FL 33029
Title	DIR
Name	MCFADIN, PATRICE
Address	701 S. DEERWOOD AVE
City-State-Zip:	ORLANDO FL 32825
Title	DIR
Name	FOLSOM, KEITH
Address	2539 DAKOTA TRAIL
City-State-Zip:	CASSELBERRY FL 32730

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: ANGELA M FARRUGIA**PRESIDENT****01/18/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date