

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000010686

**FILED  
Sep 05, 2016  
Secretary of State  
CC4631389086**

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

**Current Principal Place of Business:**

4319 S. RIDGEWOOD AVE  
PORT ORANGE, FL 32127

**Current Mailing Address:**

4319 S. RIDGEWOOD AVE  
PORT ORANGE, FL 32127 US

**FEI Number: 32-6545444**

**Certificate of Status Desired: Yes**

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

WIGGINS, LILLIE G  
4319 S. RIDGEWOOD AVE  
PORT ORANGE, FL 32127 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 WIGGINS, LILLIE G  
Address 4319 S. RIDGEWOOD AVE  
City-State-Zip: PORT ORANGE FL 32127

Title VP  
Name TAYLOR, SAMANTHA G  
Address 4319 S. RIDGEWOOD AVE  
City-State-Zip: PORT ORANGE FL 32127

Title TREA  
Name WIGGINS, JOSHUA R SR  
Address 4319 S. RIDGEWOOD AVE  
City-State-Zip: PORT ORANGE FL 32127

*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 WIGGINS**

**PRESIDENT**

**09/05/2016**

Electronic Signature of Signing Officer/Director Detail

Date