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. 04/02/2018

VP

SIGNATURE: SAMANTHA TAYLOR

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N14000010686

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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: 01-0640170

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

WIGGINS, LILLIE G 4319 S. RIDGEWOOD AVE PORT ORANGE, FL 32127 US

Officer/Director Detail :

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:

Title Ρ Title VP WIGGINS, LILLIE G Name Name TAYLOR, SAMANTHA G Address 4319 S. RIDGEWOOD AVE Address 4319 S. RIDGEWOOD AVE City-State-Zip: PORT ORANGE FL 32127 City-State-Zip: PORT ORANGE FL 32127 Title TREA WIGGINS, JOSHUA R SR Name Address 4319 S. RIDGEWOOD AVE City-State-Zip: PORT ORANGE FL 32127



Date

Certificate of Status Desired: No

Date