


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90082 023 ***150.00

DOCUMENT # 174398 1. Entity Name ANGEL-OLSON INC																																																																																																																																																					
Principal Place of Business POST OFFICE BOX 366 HAINES CITY, FL 33844			Mailing Address POST OFFICE BOX 366 HAINES CITY, FL 33844																																																																																																																																																		
2. Principal Place of Business - No P.O. Box # 300 SPENCER SHORES		3. Mailing Address Suite, Apt. #, etc.																																																																																																																																																			
City & State HAINES CITY, FL		City & State		4. FEI Number 59-6072793																																																																																																																																																	
Zip 33844		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																																																	
6. Name and Address of Current Registered Agent TUNNO, W C JR 7 SPENCER SHORES HAINES CITY, FL 33844				7. Name and Address of New Registered Agent Name TUNNO, W C JR Street Address (P.O. Box Number is Not Acceptable) 300 SPENCER SHORES City HAINES CITY, FL 33844																																																																																																																																																	
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																																																																																					
SIGNATURE <u><i>W C Tunno Jr</i></u> 1-18-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																																																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																																		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																																																					
SIGNATURE: <u><i>W C Tunno Jr</i></u> 1-18-07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																																																					