

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752751

FILED  
Apr 07, 2005  
Secretary of State

Entity Name: ALL ANGELS BY THE SEA, INC.

## Current Principal Place of Business:

563 BAY ISLES RD  
LONGBOAT KEY, FL 34228

## New Principal Place of Business:

## Current Mailing Address:

563 BAY ISLES RD  
LONGBOAT KEY, FL 34228

## New Mailing Address:

FEI Number: 59-2266592

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LANG ESQ, BRADLEY W  
400 MADISON DRIVE STE 250  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

LANG ESQ, BRADLEY W  
6151 LAKE OSPREY DRIVE  
THIRD FLOOR  
SARASOTA, FL 34240 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:

04/07/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SPITLER, DOWNE  
Address: 3540 FAIR OAKS DRIVE  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: VD ( ) Delete  
Name: WHEELER, ED  
Address: 4311 GULF OF MEXICO DR. #503  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: SD ( ) Delete  
Name: HAMBRECHT, CAROL  
Address: 4967 80TH AVE. CIR. E.  
City-St-Zip: SARASOTA, FL 34243

Title: TD ( ) Delete  
Name: HENRY, JOHN  
Address: 3045 MARINERS COVE DRIVE UNIT 121  
City-St-Zip: CORTEZ, FL 34215

Title: VPD ( ) Delete  
Name: REDGRAVE, JOHN  
Address: 1485 GULF OF MEXICO DR  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: D ( ) Delete  
Name: WARDOWSKI, WILL  
Address: 570 BOWSPRIT LANE  
City-St-Zip: LONGBOAT KEY, FL 34228

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SPITLER, DOWNS  
Address: 3540 FAIR OAKS DRIVE  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOHN HENRY

TREA

04/07/2005

Electronic Signature of Signing Officer or Director

Date