

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M20738

FILED  
Apr 15, 2006  
Secretary of State

**Entity Name:** ANGEL'S DECORATOR SERVICE, INC.

**Current Principal Place of Business:**

221 OAKWOOD DRIVE  
WEST MELBOURNE, FL 32904 US

**New Principal Place of Business:**

**Current Mailing Address:**

76 EAST STREET  
WAYNESVILLE, NC 28786 US

**New Mailing Address:**

464 BALSAM DRIVE  
WAYNESVILLE, NC 28786 US

**FEI Number:** 59-2596024

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANGEL, ROBIN  
221 OAKWOOD DRIVE  
WEST MELBOURNE, FL 32904 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ANGEL, ROBIN,  
Address: 221 OAKWOOD DRIVE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: V/S ( ) Delete  
Name: ANGEL, LINDA,  
Address: 221 OAKWOOD DRIVE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D ( ) Delete  
Name: GARY SCOTT ANGEL,  
Address: 3070 S.W. EDWARDS AVE.  
City-St-Zip: PALM CITY, FL 34990

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ANGEL, ROBIN,  
Address: 221 OAKWOOD DRIVE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: S (X) Change ( ) Addition  
Name: ANGEL, LINDA,  
Address: 221 OAKWOOD DRIVE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: V (X) Change ( ) Addition  
Name: GARY SCOTT ANGEL,  
Address: 5110 NORTHRIDGE ROAD  
City-St-Zip: SARASOTA, FL 34238

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** LINDA ANGEL

S

04/15/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date