

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005239

FILED
Apr 13, 2004
Secretary of State

Entity Name: GUARDIAN ANGEL COMMUNITY DEVELOPMENT CORPOATION INC.

Current Principal Place of Business:

417 PROSPECT AVENUE
COCOA, FL 32922

New Principal Place of Business:

Current Mailing Address:

417 PROSPECT AVENUE
COCOA, FL 32922

New Mailing Address:

FEI Number: 02-0636034

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, DOROTHY ` DR
SE THIRD STREET
BELLE GLADE, FL 33430

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

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: BOONE, BARBARA
Address: 2600 CLEARLARK RD
City-St-Zip: COCOA, FL 32922

Title: T () Delete
Name: COPELAND, STACY
Address: 413 PROSPECT AVE
City-St-Zip: COCOA, FL 32922

Title: PT () Delete
Name: DORA JACKSON, ANNIE
Address: 417 PROSPECT AVE
City-St-Zip: COCOA, FL 32922

Title: VPD () Delete
Name: PETERSON, FREDDY L
Address: 1540 MERCER WAY
City-St-Zip: DECATUR, GA 30035

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: FOX, BRENDA T VPD
Address: P.O. BOX 4
City-St-Zip: SHARPES, FL 32926

Title: T (X) Change () Addition
Name: MORAGNE, WILLIE B T
Address: 3615 BROPHY BLVD.
City-St-Zip: COCOA, FL 32926

Title: PT (X) Change () Addition
Name: JACKSON, ANNIE DORA PT
Address: 417 PROSPECT AVE
City-St-Zip: COCOA, FL 32922

Title: S (X) Change () Addition
Name: SAM, DETTRA S
Address: 3690 SAVANNAHS TRIAL
City-St-Zip: MERRITT ISLAND, FL 32953

Title: PT () Change (X) Addition
Name: JACKSON, ANNIE D PT
Address: 417 PEOSPECT AVE.
City-St-Zip: COCOA, FL 32922

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: ANNIE DORA JACKSON

PT

04/13/2004

Electronic Signature of Signing Officer or Director

Date