

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006001

FILED
Jan 15, 2009
Secretary of State

Entity Name: HOMES OF ANGELS PMA, INC.

Current Principal Place of Business:

P.O. BOX 360121
TAMPA, FL 33619 US

New Principal Place of Business:

1614 CARNEGIE CIRCLE
TAMPA, FL 33619 US

Current Mailing Address:

P.O. BOX 360121
TAMPA, FL 33673 US

New Mailing Address:

FEI Number: 05-0550234 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BECKFORD, ERNESTO
3808 N. 51ST STREET
TAMPA, FL 33619 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BECKFORD, ERNESTO
Address: 3808 N. 51ST STREET
City-St-Zip: TAMPA, FL 33619

Title: VP () Delete
Name: EVANS, MARVA
Address: 3808 N. 51ST STREET
City-St-Zip: TAMPA, FL 33619

Title: TS () Delete
Name: DAVENPORT, JESSE
Address: 4309 NASSAU ST.
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ERNESTO BECKFORD

DIR

01/15/2009

Electronic Signature of Signing Officer or Director

Date