2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007492

Address:

City-St-Zip:

--- OLUI DDENIO ANOEL NETAG

FILED May 02, 2005 Secretary of State

| Entity Na | me: CHILDREN'S ANGEL NETWORK, INC |). |
|--|--|--|
| Current Principal Place of Business: | | New Principal Place of Business: |
| 13711 HICKORY RUN LANE FORT MYERS, FL 33912 Current Mailing Address: | | P.O. BOX 6216 FORT MYERS, FL 33911 |
| | | New Mailing Address: |
| P.O. BOX 60983 FORT MYERS, FL 33906 | | P.O. BOX 6216 FORT MYERS, FL 33911 |
| In accordan | r: 22-3879629 FEI Number Applied For() nce with s. 607.193(2)(b), F.S., the corporation did r d Address of Current Registered Agent: | FEI Number Not Applicable () Certificate of Status Desired () not receive the prior notice. Name and Address of New Registered Agent: |
| MITAR, GEORGE J III 1533 HENDRY ST., STE. 100 FT. MYERS, FL 33901 US | | VANBIBBER, LYNDA R P.O. BOX 6216 FT. MYERS, FL 33911 US |
| | e named entity submits this statement for the e of Florida. | purpose of changing its registered office or registered agent, or both, |
| SIGNATU | RE: LYNDA R. VANBIBBER | 05/02/2005 |
| | Electronic Signature of Registered Ag | gent Date |
| OFFICER | S AND DIRECTORS: | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS |
| Title: Name: Address: City-St-Zip: | PD () Delete VANBIBBER, LYNDA P.O. BOX 6216 FT. MYERS, FL 339116216 | Title: () Change () Addition Name: Address: City-St-Zip: |
| Title: Name: Address: City-St-Zip: | VD (X) Delete MURRAY, KATHLEEN D 13711 HICKORY RUN LANE FT. MYERS, FL 33912 | Title: () Change () Addition Name: Address: City-St-Zip: |
| Title: Name: Address: City-St-Zip: | SD () Delete MACOMBER, DEAN 4291 CEDAR ST. ST. JAMES CITY, FL 33956 | Title: () Change () Addition Name: Address: City-St-Zip: |
| Title: Name: Address: City-St-Zip: | D () Delete SCHWARTZEL, CHARLOTTE 3573 EDGEWOOD AVE. FT. MYERS, FL 33916 | Title: () Change () Addition Name: Address: City-St-Zip: |
| Title: Name: | () Delete | Title: VD () Change (X) Addition Name: MAYER, FRED |

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.

Address:

City-St-Zip:

3156 SIXTH AVENUE

ST.JAMES CITY, FL 33956

SIGNATURE: LYNDA R. VANBIBBER PD 05/02/2005