2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007549

FILED Feb 21, 2007 Secretary of State

Entity Name: SOUTH WEST FLORIDA PODS ANGELS FAMILY SUPPORT GROUP, INC.

Current Principal Place of Business: New Principal Place of Business: 3422 SE 11TH PLACE CAPE CORAL, FL 33904 **Current Mailing Address: New Mailing Address:** 3422 SE 11TH PLACE CAPE CORAL, FL 33904 FEI Number: 75-3075628 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PRINGLE, MARY B 3422 S.E. 11TH PLACE CAPE CORAL, FL 339044209 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PRINGLE, MARY B Name: Name: 3422 S.E. 11TH PLACE Address: Address: City-St-Zip: CAPE CORAL, FL 339044209 City-St-Zip: Title: () Delete Title: () Change () Addition Name: HARRIS, NANCY Name: Address: 1270 SW 28TH TERR. Address: City-St-Zip: FT LAUDERDALE, FL 33312 City-St-Zip: Title: () Delete Title: () Change () Addition NUNLEY, MICHELLE Name: Name: 512 SE 6TH STREET #3 Address: Address: City-St-Zip: CAPE CORAL, FL 33990 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: MAILLOUX, CAROLE Name: BUNN, MANDIE Address: P.O.BOX 7531 Address: 563 PACHMAN CIRCLE City-St-Zip: FT MYERS, FL 33906 City-St-Zip: LEHIGH ACRES, FL 33936

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

SIGNATURE: MAY BETH PRINGLE Ρ 02/21/2007