


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # N03000002623 1. Entity Name EARTH ANGELS OF CLERMONT, INC.		
Principal Place of Business 151 E MINNEHAHA AVE CLERMONT, FL 34711	Mailing Address 151 E MINNEHAHA AVE CLERMONT, FL 34711	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent SWEETING, LURLENE M 151 E MINNEHAHA AVE CLERMONT, FL 34711		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC DODGE, LARRY 1401 WHWY 50 #54 CLERMONT, FL 34711	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPEAR, MARLIS J 3643 KINGSWOOD CT CLERMONT, FL 34711	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LALUMIA, LYDIA 3915 SCARBOROUGH CT CLERMONT, FL 34711	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT LOVEJOY, LINDA 4012 HAMMERSMITH DR CLERMONT, FL 34711	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SWEETING, LURLENE M 151 E MINNEHAHA AVE CLERMONT, FL 34711	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <u>Linda J. Lovejoy, Treasurer</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>4/14/05</u> (352) 241-8578 <small>Date Daytime Phone #</small>



01242005 No Chg-NP CR2E037 (10/03)

4. FEI Number 45-0508782	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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04/19/05-80033-017 61.25

**DO NOT WRITE
IN THIS SPACE**