

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 08:00 A
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**



04062008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
45-0508782

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

000000888911

04/22/08-80032-025 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC DODGE, LARRY 1401 W HWY 50 #54 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Linda J. Lovejoy* **LINDA J. LOVEJOY** 4/07/08 352-241-8578
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #