

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009968

FILED
Jun 30, 2004
Secretary of State**Entity Name:** ANGELS WITH ONLY ONE WING, INC.**Current Principal Place of Business:**7099 ARDMORE ROAD
BROOKSVILLE, FL 34601**New Principal Place of Business:**7111 ARDMORE ROAD
BROOKSVILLE, FL 34601**Current Mailing Address:**7099 ARDMORE ROAD
BROOKSVILLE, FL 34601**New Mailing Address:**7111 ARDMORE ROAD
BROOKSVILLE, FL 34601**FEI Number:** 55-0852155**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TUCKER, MARTHA A
7099 ARDMORE ROAD
BROOKSVILLE, FL 34601**Name and Address of New Registered Agent:**NEERING, GINA S
7111 ARDMORE ROAD
BROOKSVILLE, FL 34601

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: GINA SCHOFIELD NEERING

06/30/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: TUCKER, MARTHA A
Address: 7099 ARDMORE ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: V () Delete
Name: NEERING, GINA V
Address: 7111 ARDMORE ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: T () Delete
Name: HUNTER, BOYD E
Address: 7099 ARDMORE ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: S () Delete
Name: NEERING, DAVID R
Address: 7111 ARDMORE ROAD
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NEERING, GINA S
Address: 7111 ARDMORE ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: V (X) Change () Addition
Name: NEERING, DAVID
Address: 7111 ARDMORE ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: T (X) Change () Addition
Name: NEERING, GINA S
Address: 7111 ARDMORE ROAD
City-St-Zip: BROOKSVILLE, FL 34601

Title: S (X) Change () Addition
Name: NEERING, GINA S
Address: 7111 ARDMORE ROAD
City-St-Zip: BROOKSVILLE, FL 34601

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.

SIGNATURE: GINA SCHOFIELD NEERING

PRES

06/30/2004

Electronic Signature of Signing Officer or Director

Date