

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 02, 2005 8:00 am
Secretary of State

09-02-2005 90013 049 ****70.00

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1. Entity Name
ANGEL4ME.COM, INC.



Principal Place of Business
6308 9TH AVENUE SOUTH
GULFPORT, FL 33707 US

Mailing Address
P. O. BOX 530741
ST. PETERSBURG, FL 33747 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08282005

Chg-NP

CR2E037 (10/03)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WOODS, BRENDA L
6308 9TH AVENUE SOUTH
ST. PETERSBURG, FL 33707

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when constituting)

DATE

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete
NAME WOODS, BRENDA L BA
STREET ADDRESS 6308 9TH AVE SOUTH
CITY-ST-ZIP GULFPORT, FL 33707

TITLE P/D ☒ Change ☐ Addition
NAME Brenda L. Woods M.A.
STREET ADDRESS 6308 9th Ave So
CITY-ST-ZIP Gulfport, Florida 33707

TITLE VP ☐ Delete
NAME GREENE, LORRAINE MRS.
STREET ADDRESS 2511 5TH ST. SO
CITY-ST-ZIP ST. PETERSBURG, FL 33701

TITLE VT ☒ Change ☐ Addition
NAME Greene Lorraine Mrs
STREET ADDRESS 2511 5th St. So
CITY-ST-ZIP St. Petersburg, Fla. 33701

TITLE SEC ☐ Delete
NAME DUNBAR, SHARON
STREET ADDRESS 6308 9TH AVE SO
CITY-ST-ZIP ST. PETERSBURG, FL 33707

TITLE SEC/IT ☒ Change ☐ Addition
NAME Dunbar Sharon
STREET ADDRESS 6308 9th Ave So
CITY-ST-ZIP St. Petersburg, FL 33707

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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: Brenda L. Woods M.A. / P.D. Brenda L. Woods M.A. / P.D. 8/24/05 374-3024
(727)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #