

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001469

FILED  
Feb 18, 2011  
Secretary of State

**Entity Name:** THE WHITE GLOVE GALS, INC.

**Current Principal Place of Business:**

18000 SW 288 ST  
HOMESTEAD, FL 33030

**New Principal Place of Business:**

**Current Mailing Address:**

18000 SW 288 ST  
HOMESTEAD, FL 33030

**New Mailing Address:**

FEI Number: 20-2326229

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

TORCISE, GAEL L  
18000 SW 288 ST  
HOMESTEAD, FL 33030 US

**Name and Address of New Registered Agent:**

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:**

Title: P  
Name: TORCISE, GAEL L  
Address: 18000 SW 288 ST  
City-St-Zip: HOMESTEAD, FL 33030 US

Title: S  
Name: VAN TASSEL, MASON H  
Address: 106 FORD CT  
City-St-Zip: SUMMERVILLE, SC 29483 US

Title: D  
Name: LOBOS, WENDY  
Address: 1482 N BLUEBIRD LN  
City-St-Zip: HOMESTEAD, FL 33035

I hereby 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 all other like empowered.

SIGNATURE: GAEL L. TORCISE

P

02/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date