2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010577

Entity Name: ANGEL'S OF "FAITH", INC.

FILED Aug 08, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

105 WEST CYPRESS STREET 145 DOUBLE DIAMOND DR. DAVENPORT, FL 33837 POLK CITY, FL 33868

Current Mailing Address: New Mailing Address:

P.O. BOX 827 145 DOUBLE DIAMOND DR. DAVENPORT, FL 33836 POLK CITY, FL 33868

FEI Number: 26-0127426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

PETERS, TAMMY M

105 WEST CYPRESS STREET

DAVENPORT, FL 33837 US

PETERS, TAMMY M

145 DOUBLE DIAMOND DRIVE
POLK CITY, FL 33868 US

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: 08/08/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: PETERS, TAMMY M Name: PETERS, TAMMY M

 Name:
 PETERS, TAMMY M
 Name:
 PETERS, TAMMY M

 Address:
 105 WEST CYPRESS STREET
 Address:
 145 DOUBLE DIAMOND DRIVE

 City-St-Zip:
 DAVENPORT, FL 33837 US
 City-St-Zip:
 POLK CITY, FL 33868 US

Title: VP () Delete Title: () Change () Addition

 Name:
 COLE, RACHAEL M
 Name:

 Address:
 339 TINDEL TRAIL
 Address:

 City-St-Zip:
 LAKE WALES, FL 33898 US
 City-St-Zip:

Title: SEC () Delete Title: () Change () Addition

 Name:
 VANCE, JENNIFER A
 Name:

 Address:
 2721 ADAIR ROAD
 Address:

 City-St-Zip:
 DAVENPORT, FL 33837 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: TAMMY PETERS P 08/08/2008