


FILED
Apr 13, 2007 8:00 am
Secretary of State

04-02-2007 90093 049 ****61.25

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N05000011189 1. Entity Name BIG ANGELS MINISTRIES, INC.	
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Principal Place of Business 924 VALMAR ST. BRANDON, FL 33511	Mailing Address 924 VALMAR ST. BRANDON, FL 33511
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66009098



03022007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3744126	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent PENNINGTON, R DON 924 VALMAR ST. BRANDON, FL 33511	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when re-electing) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PENNINGTON, R DON 924 VALMAR ST. BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PENNINGTON, MARY JO 924 VALMAR ST. BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NASWORTHY, SANDRA L 14255 OLD HUNTER RD BROOKSVILLE, FL 34601
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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: Mary Jo Pennington
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-07 (813) 681-4993
Date Daytime Phone #