2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N08000002462

Entity Name: SCID, ANGELS FOR LIFE, INC.

Current Principal Place of Business:

6923 LACY DR
LAKELAND, FL 33813

New Principal Place of Business:

Current Mailing Address:

6923 LACY DR
LAKELAND, FL 33813

New Mailing Address:

FEI Number: 26-2301379 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SMITH, JOHN
6923 LACY DR
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

SMITH, JOHN W
6923 LACY DR
LAKELAND, FL 33813 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: JOHN W SMITH 04/23/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SMITH, HEATHER
Address: 6923 LACY DR
City-St-Zip: LAKELAND, FL 33813

Title: S ( ) Delete
Name: BALLARD, BARB
Address: 12122 BEAVER CREEK RD
City-St-Zip: CLIFTON, VA 20124

Title: T ( ) Delete
Name: SMITH, JOHN
Address: 6923 LACY DR
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: SMITH, HEATHER
Address: 6923 LACY DR
City-St-Zip: LAKELAND, FL 33813

Title: DS (X) Change ( ) Addition
Name: BALLARD, BARB
Address: 12122 BEAVER CREEK RD
City-St-Zip: CLIFTON, VA 20124

Title: DT (X) Change ( ) Addition
Name: SMITH, JOHN W
Address: 6923 LACY DR
City-St-Zip: LAKELAND, FL 33813

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: JOHN W SMITH DT 04/23/2009
Electronic Signature of Signing Officer or Director Date