

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000006069

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** ANGEL'S ADVOCACY CARE NETWORK, INC.

**Current Principal Place of Business:**

198 KNIGHT BOXX TOAD  
MIDDLEBURG, FL 32068

**New Principal Place of Business:**

198 KNIGHT BOXX ROAD  
SUITE A  
MIDDLEBURG, FL 32068

**Current Mailing Address:**

198 KNIGHT BOXX TOAD  
MIDDLEBURG, FL 32068

**New Mailing Address:**

198 KNIGHT BOXX ROAD  
SUITE A  
MIDDLEBURG, FL 32068

**FEI Number:** 27-2931174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TOLSON, JOHN F JR  
462 KINGSLEY AVE SUITE 101  
ORANGE PARK, FL 32073 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: DP  
Name: LAMB, ANDREW REV  
Address: 2793 ADMIRALS WALK DR., N.  
City-St-Zip: ORANGE PARK, FL 32073

Title: DV  
Name: GERLACH, NANCY  
Address: 1304 OAKLANDING LANE  
City-St-Zip: FLEMING ISLAND, FL 32003

Title: DT  
Name: HENNING, RICK  
Address: 3116 PEPPERTREE DRIVE  
City-St-Zip: MIDDLEBURG, FL 32068

Title: DS  
Name: MARTIN, LOUISE  
Address: 932 RIDGEWALL COURT  
City-St-Zip: ORANGE PARK, FL 32065

Title: D  
Name: FUNYAK, J.D. REV  
Address: 2521 COUNTRY SIDE DRIVE  
City-St-Zip: FLEMING ISLAND, FL 32003

Title: D  
Name: EUWEMA, MICHAEL MD  
Address: 3699 THOUSAND OAKS DR.  
City-St-Zip: ORANGE PARK, FL 32065

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:** NANCY GERLACH

DV

04/27/2011

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

\_\_\_\_\_  
Date