

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N46214
1. Corporation Name

(5)

CHOSEN ANGELS, CORP.



Principal Place of Business

Mailing Address

254 CLEARVIEW RD.
CHULUOTA FL 32766

254 CLEARVIEW RD.
CHULUOTA FL 32766

3. Date Incorporated or Qualified
11/26/1991

3a. Date of Last Report
08/09/1995

4. FEI Number
59-3094083

Applied For
Not Applicable

2. Principal Place of Business
21 254 Clearview Rd.

2a. Mailing Address
26 254 Clearview Rd.

Suite, Apt. #, etc.
22 Chuluota, Fl.
City & State

Suite, Apt. #, etc.
27 Chuluota, Fl.
City & State

23 32766
Zip

Country

28 32766
Zip

Country

24

25

29

30

5. Certificate of Status Desired ☒ XX \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

MARTIN, HELEN M.
254 CLEARVIEW RD.
CHULUOTA FL 32766

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CPD
NAME MARTIN, HELEN M
STREET ADDRESS 254 CLEARVIEW RD.
CITY-ST-ZIP CHULUOTA FL

TITLE D
NAME GREEN, JULIE
STREET ADDRESS 10313 CEDARHURST AVE
CITY-ST-ZIP ORLANDO FL 32825

TITLE DM
NAME SHERMAN, MICHELLE
STREET ADDRESS 471 LOWNDES SQ.
CITY-ST-ZIP CASSELBERRY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Helen M. Martin President April 17, 1996 407.365.6515
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (12/95)

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Cont. Nonprofit corporation annual report for 1996

Document # N46214
Chosen Angels, Corp.

Additional Officers:

D
Ora Daniels
604 Ohio Ave.,
Orlando Fl. 32805

D
Myron Edward Chapman
5404 Bonefish St.
Orlando, Fl. 32812

D
George Martin
254 Clearview Rd.
Chuluota, Fl. 32766