

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000000774.

1. Entity Name

ANGELS IN THE SUN, INC.

Principal Place of Business

1326 DIXIE LANE SOUTH
SOUTH DIXIE FL 33707
US

Mailing Address

1326 DIXIE LANE SOUTH
SOUTH DIXIE FL 33707
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BROWDER, ANNA I
1326 DIXIE LANE SOUTH
SOUTH TASEDEX FL 33707

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME PD
STREET ADDRESS BROWDER, ANNA
CITY-ST-ZIP 1100 PINELLAS BAYWAY, 204 1326 DIXIE LANE
TIERRA VERDE FL 33715 SO. PASADENA, FL 33707

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME VP
STREET ADDRESS FIORE, FRANCESCA M
CITY-ST-ZIP 4845 WINCHESTER DRIVE
SARASOTA FL 34234

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME TD
STREET ADDRESS BALDWIN, TIM
CITY-ST-ZIP 1249 OAKVIEW DR
SARASOTA FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME BROWDER, JOHN
STREET ADDRESS 1326 DIXIE LANE SOUTH
CITY-ST-ZIP S PASADENA FL 33707

TITLE
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CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Feb 19, 2001 8:00 am
Secretary of State

02-19-2001 90030 002 ****61.25

717749



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3328395

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

CR2E037 (10/00)