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Feb 04 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N96000001045 (1)

1. Corporation Name

GUARDIAN ANGEL HOUSE, INC.



Principal Place of Business

Mailing Address

~~560 DUVAL ST NE~~
PALM BAY FL 32907

560 DUVAL ST NE
PALM BAY FL 32907-3185

Location Confidential
as below:

2. Principal Place of Business

21 1605 SANTOS Rd. SE

2a. Mailing Address

26 PO BOX 500367

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 APT. A + B

27

City & State

City & State

23 PALM BAY FL

28 MALABAR FL

Zip

Country

Zip

Country

24 32909

25 Brevard

29 32950-0367

30 Brevard

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

02/27/1996

3a. Date of Last Report

N/A

4. FEI Number

59-3363833

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

NO \$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

MAROIS, SUZANNE
560 DUVAL ST NE
PALM BAY FL 32907

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 SUZANNE MAROIS

Suzanne Marois

January 24, 1997

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

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE DIRECTOR, CEO, PRESIDENT ☐ DELETE

NAME SUZANNE MAROIS

STREET ADDRESS 560 DUVAL ST. NE

CITY-ST-ZIP PALM BAY FL 32907

TITLE DIRECTOR + VICE PRESIDENT ☐ DELETE

NAME John A. Marois

STREET ADDRESS 560 Duval St NE

CITY-ST-ZIP Palm Bay FL 32907

TITLE Director ☐ DELETE

NAME Carol V. Salois

STREET ADDRESS 115 Angela RD SE Palm Bay 32907

CITY-ST-ZIP Palm Bay FL 32907

TITLE 2nd Vice President ☐ DELETE

NAME Ira Stienberg

STREET ADDRESS 315 Stendal Rd

CITY-ST-ZIP Palm Bay 32907

TITLE Treasurer ☐ DELETE

NAME Alice Cloutier

STREET ADDRESS 171 Greenacre Dr SE Palm Bay 32907

CITY-ST-ZIP Palm Bay FL 32907

TITLE Secretary ☐ DELETE

NAME Rowena Gibbons

STREET ADDRESS 2911 Sailfish Palm Bay 32907

CITY-ST-ZIP Palm Bay FL 32907

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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: Suzanne Marois

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 24, 1997

Date

Daytime Phone # 0018834

CR2E037 (9/96)