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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jun 10, 1999 8:00 am  
Secretary of State

06-10-1999 90002 001 \*\*\*\*\*8.75

06-10-1999 90002 002 \*\*\*\*\*61.25

DOCUMENT # N97000004771

1. Corporation Name

THE ANGELS OF CHARITY, INC.

Principal Place of Business  
2531 WINDSOR WAY CT.  
WEST PALM BEACH FL 33414

Mailing Address  
2531 WINDSOR WAY CT.  
WEST PALM BEACH FL 33414



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip Country

3. Date Incorporated or Qualified

08/21/1997

4. FEI Number

65-0791511

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

BERKOWITZ, MITCHELL P.A.  
2601 N. OCEAN AVE., SUITE F  
SINGER ISLAND FL 33404

10. Name and Address of New Registered Agent

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 P/D ☐ DELETE

NAME SULLIVAN, DOROTHY A

STREET ADDRESS 2531 WINDSOR WAY CT.

CITY-ST-ZIP WEST PALM BEACH FL 33414

TITLE V ☐ DELETE

NAME TURNABEN, DEBORAH

STREET ADDRESS 10254 HUNT CLUB LANE

CITY-ST-ZIP PALM BEACH GARDENS FL 33418

TITLE V ☐ DELETE

NAME SIEGEL, DENISE

STREET ADDRESS 13767 LE BATEAU LANE

CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE T/D ☐ DELETE

NAME GERBAUER, PAMELA O

STREET ADDRESS 13811 ISHNALA CIRCLE

CITY-ST-ZIP WEST PALM BEACH FL 33414

TITLE S/D ☐ DELETE

NAME MILLER, JOAN S

STREET ADDRESS 2000 EMBASSY DRIVE

CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

Pamela O Gerbauer  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Treasurer

5/1/99

Date

561-366-0122

Daytime Phone #

CR2E037 (11/98)

0042433