2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006
Secretary of State

DOCUMENT# N99000001338

Entity Name: ANGELAID MINISTRIES, INC.

Current Principal Place of Business:

1704 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

New Principal Place of Business:

3405 ATLANTIC BOULEVARD
JACKSONVILLE, FL 32207

Current Mailing Address:

1704 HENDRICKS AVENUE
JACKSONVILLE, FL 32207

New Mailing Address:

PO BOX 47527
JACKSONVILLE, FL 32247

FEI Number: 59-3560544 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SHIPLEY, CARL R
850 WATERMAN ROAD NORTH
JACKSONVILLE, FL 32207 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: PD ( ) Delete
Name: SHIPLEY, CARL R
Address: 850 WATERMAN RD., N.
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD ( ) Delete
Name: SHIPLEY, MARYLOU ARLENE
Address: 850 WATERMAN RD., N.
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD ( ) Delete
Name: WELCH, SANDRA
Address: 1821 SAN MARCO BLVD. #3
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CARL R. SHIPLEY PRES 03/29/2006

Electronic Signature of Signing Officer or Director — Date