

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000056312

1. Entity Name
GARDENING ANGELS, INC.



Principal Place of Business
2315 ELIZABETH CT.
NAPLES, FL 34112

Mailing Address
2315 ELIZABETH CT.
NAPLES, FL 34112



DO NOT WRITE IN THIS SPACE

04202005 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3649752

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SHEEHAN, JANE F
2315 ELIZABETH CT.
NAPLES, FL 34112

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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 \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

U00000333204
04/26/05-80083-006 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
SHEEHAN, JANE F
2315 ELIZABETH CT.
NAPLES, FL 34112

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
SHEEHAN, COLLEEN E
2315 ELIZABETH CT
NAPLES, FL 34112

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
SHEEHAN, WILLIAM
2315 ELIZABETH CT
NAPLES, FL 34112

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a similar title, with a title like employee.

SIGNATURE:

JANE F. SHEEHAN
Jane F. Sheehan, director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/20/05 775-4832
Date Daytime Phone #