

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000001043

**FILED**  
**Feb 13, 2009**  
**Secretary of State**

**Entity Name:** ANGEL & ASSOCIATES ENTERPRISE OF TAMPA, INC.

**Current Principal Place of Business:**

12718 DUNHILL DR  
TAMPA, FL 33624

**New Principal Place of Business:**

3837 NORTHDAL BLVD STE#325  
TAMPA, FL 33624

**Current Mailing Address:**

P.O. BOX 271688  
TAMPA, FL 33688

**New Mailing Address:**

**FEI Number:** 59-3680339

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TEWKSBURY, SAWSAN  
3837 NORTHDAL BLVD STE#325  
TAMPA, FL 33624 US

**Name and Address of New Registered Agent:**

TEWKSBURY, SUSAN  
3837 NORTHDAL BLVD STE#325  
TAMPA, FL 33624 US

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: GWEN ANDERSON

02/13/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TEWKSBURY, SAWSAN  
Address: 3837 NORTHDAL BLVD STE#325  
City-St-Zip: TAMPA, FL 33624

Title: M ( ) Delete  
Name: ANDERSON, GWEN  
Address: 3837 NORTHDAL BLVD STE #325  
City-St-Zip: TAMPA, FL 33624

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: TEWKSBURY, SUSAN  
Address: 3837 NORTHDAL BLVD STE#325  
City-St-Zip: TAMPA, FL 33624

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

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GWEN ANDERSON

MGR

02/13/2009

Electronic Signature of Signing Officer or Director

Date