

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000058097

FILED
Jan 02, 2008
Secretary of State

Entity Name: ANGELA MARIE CORPORATION

Current Principal Place of Business:

13241 WHITEHAVEN LN, STE 807
FT MYERS, FL 33966

New Principal Place of Business:

3299 HAMPTON BLVD
ALVA, FL 33920

Current Mailing Address:

13241 WHITEHAVEN LN, STE 807
FT MYERS, FL 33966

New Mailing Address:

3299 HAMPTON BLVD
ALVA, FL 33920

FEI Number: 56-2451225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIVINSKI, ANGELA M
13241 WHITEHAVEN LN, STE 807
FT MYERS, FL 33966 US

Name and Address of New Registered Agent:

SCHIVINSKI, ANGELA M
3299 HAMPTON BLVD
ALVA, FL 33920 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: ANGELA M SCHIVINSKI

01/02/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHIVINSKI, ANGELA M
Address: 13241 WHITEHAVEN LN, STE 807
City-St-Zip: FT MYERS, FL 33966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCHIVINSKI, ANGELA M
Address: 3299 HAMPTON
City-St-Zip: ALVA, FL 33920

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: ANGELA M SCHIVINSKI

D

01/02/2008

Electronic Signature of Signing Officer or Director

Date