

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000085755

FILED
Apr 18, 2009
Secretary of State

Entity Name: ALOHA ANGELS CHILDREN'S CENTER, INC.

Current Principal Place of Business:

505 SE 26TH TERRACE
CAPE CORAL, FL 33904

New Principal Place of Business:

8312 ALOHA ROAD
FORT MYERS, FL 33967

Current Mailing Address:

505 SE 26TH TERRACE
CAPE CORAL, FL 33904

New Mailing Address:

FEI Number: 20-1199894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PELLEY, KIM A
505 SE 26TH TERRACE
CAPE CORAL, FL 33904 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PELLEY, KIM A
Address: 505 SE 26TH TERRACE
City-St-Zip: CAPE CORAL, FL 33904

Title: V () Delete
Name: NYCHYK, CRYSTAL
Address: 8312 ALOHA ROAD
City-St-Zip: FORT MYERS, FL 33967

Title: D () Delete
Name: SANTIAGO, BLANCA
Address: 8312 ALOHA ROAD
City-St-Zip: FORT MYERS, FL 33967

Title: D () Delete
Name: CAVAZOS, CARMEN
Address: 8312 ALOHA ROAD
City-St-Zip: FORT MYERS, FL 33967

Title: D (X) Delete
Name: CRUZ, EYDDY
Address: 8312 ALOHA ROAD
City-St-Zip: FORT MYERS, FL 33967

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:

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 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: KIM PELLEY

P

04/18/2009

Electronic Signature of Signing Officer or Director

Date