2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2008
Secretary of State

DOCUMENT# P06000136779

Entity Name: ANGELIC PARALEGAL SERVICE, INC

Current Principal Place of Business:

551 NW 42ND AVENUE
B514
PLANTATION, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

551 NW 42ND AVENUE
B514
PLANTATION, FL 33317 US

New Mailing Address:

FEI Number: 20-5792902 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOODRUM, ELLEN T
2238 FARRAGUT STREET
HOLLYWOOD, FL 33020 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GOODRUM, ELLEN T
Address: 2238 FARRAGIT STREET
City-St-Zip: HOLLYWOOD, FL 33020 US

Title: S ( ) Delete
Name: KNOWLES, KATRINA R
Address: 1009 NW 5TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33312 US

Title: T ( ) Delete
Name: KNOWLES, KEITH F SR.
Address: 3311 NW 6TH COURT
City-St-Zip: FORT LAUDERDALE, FL 33311 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change ( ) Addition
Name: KNOWLES, KATRINA R
Address: 409 N 18TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33311 US

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: ELLEN T. GOODRUM P 05/06/2008

Electronic Signature of Signing Officer or Director Date