2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# P93000078627

Entity Name: ANGELL CORPORATE SERVICES, INC.

Current Principal Place of Business:

C/O EDWARDS & ANGELL, LLP
1 NORTH CLEMATIS ST., SUITE 400
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

C/O EDWARDS & ANGELL, LLP
1 NORTH CLEMATIS ST., SUITE 400
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 65-0463652 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLE, JONATHAN E
C/O EDWARDS & ANGELL, LLP
1 NORTH CLEMETIS ST., SUITE 400
WEST PALM BEACH, FL 33401 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:	DP	( ) Delete
Name:	COLE, JONATHAN E	
Address:	1 NORTH CLEMATIS STREET, STE. 400	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	D	( ) Delete
Name:	FINN, TERRENCE M	
Address:	101 FEDERAL ST	
City-St-Zip:	BOSTON, MA 02110	
Title:	D	( ) Delete
Name:	FREEMAN, STUART B	
Address:	2800 FINANCIAL PLAZA	
City-St-Zip:	PROVIDENCE, RI 02903	
Title:	VP	( ) Delete
Name:	IGOE, JOHN G	
Address:	1 NORTH CLEMATIS STREET, STE. 400	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	VP	( ) Delete
Name:	CROLAND, LESLIE J	
Address:	350 E LAS OLAS BLVD, SUITE 1150	
City-St-Zip:	FT LAUDERDALE, FL 33301	
Title:	VP	( ) Delete
Name:	YOUNG, GREGORY E	
Address:	1 NORTH CLEMATIS STREET, STE. 400	
City-St-Zip:	WEST PALM BEACH, FL 33401	

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JONATHAN E. COLE P 04/26/2005

Electronic Signature of Signing Officer or Director — Date