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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 30 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

3984 LAKE WORTH ROAD

SIGNATURE:

LAKE WORTH FL 33461

DOCUMENT # P95000009991 (7)

Mailing Address

3984 LAKE WORTH ROAD LAKE WORTH FL 33461-4054

ANGELS OF PALM BEACH, INC.

3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996 02/01/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0555530 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zin Country Zip This corporation has liability for intangible tax under s. 199.032, Yes 🔲 No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 POPE, TAMMY A 1066 MANOR DRIVE 82 s (P.O. Box Number is Not Acceptable) PALM SPRINGS FL 33461 83 84 22/6/ 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was enthorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the abligations of, Section 597.0505. Florida Statutes. SIGNATURE (NOTE: Registered Agent alignature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE Addition 1.1 TITLE TILE POPE. STEPHEN NAME 1.2 NAME 3984 LAKE WERTH RD **1066 MANOR DRIVE** 1.3 STREET ADDRESS STREET ADDRESS 20189 LAKE WORTH, FL 33461-4054 PALM SPRINGS FL 33461 1.4 CITY - ST - 2IP CITY - ST - ZIP DELETE Addition 2.1 TITLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP City-\$1-20 DELETE Change Addition 3.1 TITLE TillE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP ETTY-ST-ZIP Addition DELETE 4 S TITLE Tille 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 5.1 little TITLE **5.2 NAME** NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CHTY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CiTY-ST-ZIP CHTY-ST-ZIF 14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.