

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000014312

Entity Name: ANGELINE ENTERPRISES, INC.

FILED  
Apr 13, 2009  
Secretary of State

## Current Principal Place of Business:

265 S WICKHAM RD,  
SUITE #100  
MELBOURNE, FL 32904

## New Principal Place of Business:

## Current Mailing Address:

670 COCOANUT GROVE AVENUE  
WEST MELBOURNE, FL 32904

## New Mailing Address:

FEI Number: 59-3497154

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ANGELINE, MARK L PTD  
670 COCOANUT GROVE AVE.  
WEST MELBOURNE, FL 32904 US

## Name and Address of New Registered Agent:

ANGELINE, MARK L PVTSD  
670 COCOANUT GROVE AVE.  
WEST MELBOURNE, FL 32904 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: MARK L ANGELINE

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: ANGELINE, MARK L  
Address: 670 COCOANUT GROVE AVENUE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: ANGELINE, MARK L PTD  
Address: 670 COCOANUT GROVE AVENUE  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: VS ( ) Change (X) Addition  
Name: ANGELINE, MARK L VS  
Address: 670 COCOANUT GROVE AVENUE  
City-St-Zip: WEST MELBOURNE, FL 32904

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: MARK L ANGELINE

PTDS

04/13/2009

Electronic Signature of Signing Officer or Director

Date