

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 20, 2007 8:00 am
Secretary of State

03-20-2007 90015 049 ***150.00

DOCUMENT # P98000104188

1. Entity Name

ANGELA ENTERPRISES, INC.



Principal Place of Business
11699 OVERSEAS HWY.
MARATHON FL 33050

Mailing Address
109 STIRRUP KEY WOOD DR
APT 1-A-2
MARATHON FL 33050



2. Principal Place of Business - No P.O. Box #

109 Stirrup Key Wood Dr.

3. Mailing Address

Suite, Apt. #, etc.

APT. 1-A-2

Suite, Apt. #, etc.

City & State

Marathon, FL

City & State

Zip

Country

33050

Country

Monroe

Zip

Country

4. FEI Number 59-3553085

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

1st MOORE

CR2E034 (10/06)

6. Name and Address of Current Registered Agent

WRIGHT, THOMAS D
9711 OVERSEAS HWY., STE. 5
MARATHON FL 33050

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

(NOTE: Registered Agent signature required when reinstating)

DATE

3-5-07

FILE NOW! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
GOHEEN, ANGELA D
11699 OVERSEAS HWY.
MARATHON FL 33050 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VST
GOHEEN, ANGELA D
11699 OVERSEAS HWY.
MARATHON FL 33050 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Goheen Angela D. ☒ Change ☐ Addition
(Address)
109 Stirrup Key Woods Dr.
1-A-2
MARATHON FL 33050

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Goheen Angela D. ☒ Change ☐ Addition
(Address)
109 Stirrup Key Woods Dr.
MARATHON FL 33050 1-A-2

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-5-07

305 269 1977