

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000000350

**Entity Name:** ANGELS DONATIONS NON-PROFIT CORPORATION  
FOUNDATION

**FILED**  
**Mar 25, 2014**  
**Secretary of State**  
**CC4739817153**

**Current Principal Place of Business:**

312 SOUTH BROWN STREET  
EDMORE, MI 48829

**Current Mailing Address:**

312 SOUTH BROWN STREET  
EDMORE, MI 48829 US

**FEI Number: 27-1806249**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

MONROE, CAROLYN S  
11125 US 41 SOUTH  
BUILDING 3C  
GIBSONTON, FL 33534 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name LEWIS, RICHARD A  
Address 312 SOUTH BROWN STREET  
City-State-Zip: EDMORE MI 48829

Title D  
Name DENMAN, KATHRYN I  
Address 10354 N. WARNER ROAD  
City-State-Zip: ELWELL MI 48829

Title D  
Name DENMAN, KEN BSR  
Address 10354 N. WARNER ROAD  
City-State-Zip: ELWELL MI 48829

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: RICHARD LEWIS**

**DIRECTOR**

**03/25/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date