

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1500000732

Entity Name: HOLY ANGELS MINISTRIES,INC.

Current Principal Place of Business:

1619 NW 19TH CIRCLE
GAINESVILLE, FL 32608

Current Mailing Address:

1619 NW 19TH CIRCLE
GAINESVILLE, FL 32608

FEI Number: 47-3068491

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EGAN, THOMAS M
2107 SE 3RD AVENUE
OCALA, FL 34471 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 PD
Name SCHAEFER, EDWARD
Address 1619 NW 19TH CIRCLE
City-State-Zip: GAINESVILLE FL 32608

Title STD
Name HERRING, PATRICK
Address 4730 NW 13TH AVE
City-State-Zip: GAINESVILLE FL 32605

Title D
Name EGAN, THOMAS M
Address 2107 SE 3RD AVE
City-State-Zip: GAINESVILLE FL 34471

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: EDWARD E SCHAEFER

PRESIDENT

01/16/2018

Electronic Signature of Signing Officer/Director Detail

Date