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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **355281** **(7)**

1. Corporation Name
VICK'S CLEANERS, INC.

Principal Place of Business	Mailing Address
% ARTHUR J. VICK. JR. 2915 NAVY BLVD. PENSACOLA FL 32505	% ARTHUR J. VICK. JR. 2915 NAVY BLVD. PENSACOLA FL 32505-8021

3. Date Incorporated or Qualified: **11/13/1969** | 3a. Date of Last Report: **06/19/1996**

2. Principal Place of Business — 21 | Street, Apt. #, etc. — 22 | City & State — 23 | Zip — 24 | Country — 25

2a. Mailing Address — 26 | Street, Apt. #, etc. — 27 | City & State — 28 | Zip — 29 | Country — 30

4. FEI Number: **59-1280465** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

VICK, ARTHUR J., JR.
2915 NAVY BLVD
PENSACOLA FL 32505

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 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 authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of new registered agent, if changed, or typed name of current registered agent (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	☐ DELETE	1.1 TITLE — ☐ Change ☐ Addition
NAME	VICK, GRAY N.		1.2 NAME
STREET ADDRESS	1230 W. KINGS FIELD ROAD		1.3 STREET ADDRESS
CITY-ST-ZIP	CANTONMENT FL		1.4 CITY-ST-ZIP
TITLE	P	☐ DELETE	2.1 TITLE — ☒ Change ☐ Addition
NAME	VICK, ARTHUR J., JR.		2.2 NAME
STREET ADDRESS	1815 E LEVVONDAS		2.3 STREET ADDRESS — 1815 E CERVANTES ST
CITY-ST-ZIP	PENSACOLA FL		2.4 CITY-ST-ZIP
TITLE	VD	☐ DELETE	3.1 TITLE — ☐ Change ☐ Addition
NAME	HULL, RONALD L.		3.2 NAME
STREET ADDRESS	2959 STEFANI ROAD		3.3 STREET ADDRESS
CITY-ST-ZIP	CANTONMENT FL		3.4 CITY-ST-ZIP
TITLE	SD	☐ DELETE	4.1 TITLE — ☐ Change ☐ Addition
NAME	HULL, MARY V.		4.2 NAME
STREET ADDRESS	2959 STEFANI ROAD		4.3 STREET ADDRESS
CITY-ST-ZIP	CANTONMENT FL		4.4 CITY-ST-ZIP
TITLE	TD	☐ DELETE	5.1 TITLE — ☐ Change ☐ Addition
NAME	HULL, MARY V		5.2 NAME
STREET ADDRESS	2959 STEFANI ROAD		5.3 STREET ADDRESS
CITY-ST-ZIP	CANTONMENT FL		5.4 CITY-ST-ZIP
TITLE		☐ DELETE	6.1 TITLE — ☐ Change ☐ Addition
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP

CR2E034 (9/96)

14. I hereby certify that the information supplied with this filing 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 a director or officer 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.

SIGNATURE: [signature] A J Vick Jr Pres 3 4 97 9044326351

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #