## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 642172

(1)

CREECHS' IDEAL LAUNDRY AND DRYCLEANING, INC.

Principal Place of Business Mailing Address 501 MAIN STREET 501 MAIN STREET PALATKA FL 32177-3616 PALATKA FL 32177 3. Date Incorporated or Qualified 3a. Date of Last Report 10/18/1979 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1942456 21 26 Not Applicable Suite, Apr. #, etc. Suite. Apt. #. etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation has liability for intengible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CLARK, RONALD E. 501 ST. JOHNS AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) PALATKA FL 32077 83 City Zip Code 11. Forsign to the provisions of Sections 607.0502 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 family with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Change Addition THE DELETE 11 Title CREECH, CLAUDE R 1.2 NAME NAMI **CR2E034** 501 MAIN ST 1.3 STREET ADDRESS STREET ACORES! PALTKA, FL 00000 1.4 CITY-ST-ZIP CITY-ST ☐ Change DELETE Addition 2.1 T(T) F Till: F CREECH, BARBARA A NAM<sup>®</sup> 2.2 NAME . 4,11 501 MAIN ST 2.3 STREET ADDRESS STREET ADDRESS PALATKA, FL 00000 2.4 CITY-ST-ZIP C-17 S1-70 DELETE 3.1 TITLE Change Addition 1014 THOMAS, JULIA A 3.2 NAME NAME 501 MAIN ST 3.3 STREET ADDRESS STREET ADDITIESS PALATKA, FL 00000 3.4. CITY - ST - ZIP CHY- \$1-20 DELETE Change Addition 19116 4.1 TITLE 4 2 NAME NAM: 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP 00°Y-51-70° DELETE Change Addition 10.6 5.1 TITLE **5.2 NAME** NAME

14. I do 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 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 12 or Block 13 if changed, or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 City - ST - ZIP

5.4 City-St-7iP

6.1 TITLE

6.2 NAME

SIGNATURE

STREET ADDRESS

CHY-ST-ZIP

THE

NAME STREET ABORESS

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

4-29-87

904-325:2541

Change

Addition

FILED

May 08 1997 8:00am

Secretary of State