

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortam Secretary of State DIVISION OF CORPORATIONS
---	---	---

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 95 MAY 30 AM 8:10

DOCUMENT # 818751 (0)

1. Corporation Name
THE LINEN SUPPLY ASSOCIATION OF AMERICA

Principal Place of Business		Mailing Address	
1130 E. BEACH BLVD SUITE B HALLANDALE FL 33009 US		PO BOX 1283 HALLANDALE FL 33008-1283	
2. Principal Place of Business	2a. Mailing Address	DO NOT WRITE IN THIS SPACE	
21	26	3. Date Incorporated or Qualified	3a. Date of Last Report
Suite, Apt. #, etc.	Suite, Apt. #, etc.	05/24/1965	05/01/1994
22	27	4. FEI Number	Applied For
City & State	City & State	36-2036177	Not Applicable
23	28	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
Zip	Country	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
24	25	29	30
Country	Country	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status	<input type="checkbox"/> \$68.75 Supplemental Fee Not Required
25	29	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

CONTNEY, JOHN J
1130 E. BEACH BLVD
SUITE B
HALLANDALE FL 33009

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RICHMAN, TONY
STREET ADDRESS	3200 N. FIGUEROA ST
CITY - ST - ZIP	LOS ANGELES CA
TITLE	PD
NAME	STETTNER, MAX H
STREET ADDRESS	PO BOX 20410
CITY - ST - ZIP	LEHIGH VALLEY PA
TITLE	TD
NAME	WILLIAMS, TIM
STREET ADDRESS	215 S. JEFFERSON ST.
CITY - ST - ZIP	MEXICO MO
TITLE	D
NAME	AMATO, WILLIAM F
STREET ADDRESS	20 W. CENTENNIAL AVE
CITY - ST - ZIP	ROOSEVELT NY
TITLE	SM
NAME	CONTNEY, JOHN J.
STREET ADDRESS	1130 E. BEACH BLVD., SUITE B
CITY - ST - ZIP	HALLANDALE FL
TITLE	D
NAME	BIRER, STANLEY
STREET ADDRESS	1475 SUMMER ST
CITY - ST - ZIP	HAMMOND IN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	SPENCE, ROBERTE.	
13 STREET ADDRESS	330 W. 19 Terrace	
14 CITY - ST - ZIP	Kansas City, MO 64108	
21 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY - ST - ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 5/22/95 305-457-7555

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ DATE _____ (Indicate Month & Year)

818751

OFFICERS AND BOARD OF DIRECTORS

1995-1996 (Continued)

Gunnar Andreen - Region K
Sophus Berendsen A/S
Textile Service Sector
1, Klausdalsbrovej
DK-2860 Soborg
Denmark

Mul Rigby - Associate
Milliken & Co./Kex R&D Lab Div.
Milliken Design Center
P.O. Box 2596
LaGrange, GA 30241

Thomas R. Bailey - Region A
New Franklin Textile Services, Inc.
125 Fern St.
P.O. Box 796
Bangor, ME 04401-4039

Randy K. Rolf - Region I
Unitog Co.
101 W. 11th St.
Kansas City, MO 64105-1805

Robert a. Buchholtz - At Large
Morgan Services, Inc.
323 N. Michigan Ave.
Chicago, IL 60601-3716

Richard a. Smith - Region G
Crystal Linen & Uniform Rental
918 N. 5th Ave.
Yakima, WA 98902-1494

Allen DeNormandie - At Large
DeNormandie Towel & Linen
7780 S. Dante Ave.
Chicago, IL 60619-3495

Timothy E.P. Topornicki - Region J
Topper Linen Supply Ltd.
54 Junction Rd.
Toronto, Ontario, Canada M6N 1B4

Malcolm Edgar - Region L
Endeavour Services Corp. Ltd.
308 Great South Rd.
Greenlane
Auckland, New Zealand

Susan J. Troy - Region E
Federated Linen & Uniform Service
11620 Wilshire Blvd.
Suite 440
Los Angeles, CA 90025-1706

Bruce R. Feldman - At Large
Economy Linen & Towel Service
80 Mead St.
Dayton, OH 45402-2395

Royce E. Willie - Region F
Brent Industries, Inc.
P.O. Drawer P
Brent, AL 35034

E.R. (Skip) Jacobsen III - Region B
Sterling Cleaners & Textile Services
5909 Blair Rd., N.W.
Washington, D.C. 20011-2398

Jorn M. Jensen - Associate
Jensen Holding AG
Buchmatt 8
Burgdorf CH-3400
Switzerland

Fred Lenway - Region C
ARAMARK Uniform Services, Inc.
115 N. First St.
P.O. Box 7891
Burbank, CA 91502-1856

Donald L. Proudman - Associate
Automatic Control Systems
30 Waverly St.
Taunton, MA 02780-1460