

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F77845

FILED  
Apr 02, 2008  
Secretary of State

Entity Name: HERRING CLEANING SERVICES, INC.

## Current Principal Place of Business:

4566 ST JOHNS AVE  
JACKSONVILLE, FL 32210

## New Principal Place of Business:

## Current Mailing Address:

P O BOX 380090  
JACKSONVILLE, FL 32205 US

## New Mailing Address:

FEI Number: 59-1784134

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HERRING, JOAN  
4341 WOODMERE ST  
JACKSONVILLE, FL 32210 US

## Name and Address of New Registered Agent:

HERRING, JOAN C PRESIDE  
4566 ST. JOHNS AVE.  
JACKSONVILLE, FL 32210 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: JOAN C. HERRING

04/02/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: STD ( ) Delete  
Name: HERRING, SHANE,  
Address: 12008 E RISING OAKS DR  
City-St-Zip: JACKSONVILLE, FL 32223

Title: PD ( ) Delete  
Name: HERRING, JOAN,  
Address: 4341 WOODMERE ST  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: HERRING, CARL  
Address: 4341 WOODMERE ST  
City-St-Zip: JACKSONVILLE, FL 32210

Title: VD ( ) Delete  
Name: BRIGHT, JENNY  
Address: 730 ST RD 26  
City-St-Zip: MELROSE, FL 32666

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: HERRING, JOAN,  
Address: 4566 ST. JOHNS AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D (X) Change ( ) Addition  
Name: HERRING, CARL  
Address: 4566 ST. JOHNS AVENUE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOAN C. HERRING

PRES

04/02/2008

Electronic Signature of Signing Officer or Director

Date