

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P30596

**Entity Name:** ANGELICA TEXTILE SERVICES, INC.**Current Principal Place of Business:**1105 LAKEWOOD PKWY  
SUITE 210  
ALPHARETTA, GA 30009**Current Mailing Address:**1105 LAKEWOOD PKWY  
SUITE 210  
ALPHARETTA, GA 30009 US**FEI Number:** 43-1096508**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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           | PRES                        |
| Name            | VAN VLIET, DAVID            |
| Address         | 1105 LAKEWOOD PKWY, STE 210 |
| City-State-Zip: | ALPHARETTA GA 30009         |

|                 |                             |
|-----------------|-----------------------------|
| Title           | ASST. SECRETARY             |
| Name            | COFFEE, RUSSELL             |
| Address         | 1105 LAKEWOOD PKWY, STE 210 |
| City-State-Zip: | ALPHARETTA GA 30009         |

|                 |                                 |
|-----------------|---------------------------------|
| Title           | SEC                             |
| Name            | BLAKE, JONATHAN                 |
| Address         | 1105 LAKEWOOD PKWY<br>SUITE 210 |
| City-State-Zip: | ALPHARETTA GA 30009             |
| Title           | TREA                            |
| Name            | PARTRIDGE, JOHN                 |
| Address         | 1105 LAKEWOOD PKWY, STE 210     |
| City-State-Zip: | ALPHARETTA GA 30009             |

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN PARTRIDGE**TREASURER****02/17/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date