

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 08:00 AM
Secretary of State

DOCUMENT # 127004

1. Entity Name
NATIONAL LAUNDRY & CLEANING COMPANY, INC.



Principal Place of Business
**107 WEST GREGORY STREET
PENSACOLA, FL 32501**

Mailing Address
**107 WEST GREGORY STREET
PENSACOLA, FL 32501**



01312006 No Chg-P CRZE034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-0373350

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MORRISON III, R. BRUCE
107 WEST GREGORY STREET
PENSACOLA, FL 32501**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**PSD
MORRISON, III, R. BRUCE
107 WEST GREGORY STREET
PENSACOLA, FL 32501**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**VD
MORRISON, ANNE L
107 W GREGORY STREET
PENSACOLA, FL 32501**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
**STD
TAYLOR, JULIA C
3539 FIRESTONE BLVD
PENSACOLA, FL 32503**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

000000423828
02/18/06-80025-004 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

R. B. Morrison, III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/3/06 (850) 438-3260
Daytime Phone