2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 127004

FILED Apr 07, 2009 Secretary of State

Entity Name: NATIONAL LAUNDRY & CLEANING COMPANY, INC.

Current Principal Place of Business:		e of Business:	New Principal Place of Business:	
	T GREGORY DLA, FL 3250			
urrent Mailing Address:			New Mailing Address:	
	T GREGORY DLA, FL 3250			
I Number	: 59-0373350	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
	T GREGORY DLA, FL 3250			
e above	e named entity e of Florida	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,
the State	e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,
the State	e of Florida. RE:	submits this statement for the		ed office or registered agent, or both, Date
the State	e of Florida. RE: Electro			
the State GNATUI	e of Florida. RE: Electro	nic Signature of Registered Ag	ent	
the State GNATUI ection Cal	e of Florida. RE: Electro mpaign Financi S AND DIRECT PSD (MORRISON, I	onic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete II, R. BRUCE REGORY STREET	ent	Date
the State GNATUI ction Car FFICER: e: me: dress:	e of Florida. RE: Electro mpaign Financi S AND DIRECT PSD (MORRISON, I 107 WEST GI PENSACOLA, VD (MORRISON, A	onic Signature of Registered Ageng Trust Fund Contribution (). CTORS:) Delete II, R. BRUCE REGORY STREET FL 32501 X) Delete NNNE L ORY STREET	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTOR

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: JULIA C. TAYLOR S/T 04/07/2009