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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 346202

(5)

CONSOLIDATED MAINTENANCE SERVICES, INC.

FILED

Jun 03 1997 8:00am

Secretary of State

Principal Plac	incipal Place of Business Mailing Address			1 SANDAR 19174 BIBIN DEILD LIDIY BOYIN ŞIBY DIDIY DIDIY DIDIY DEDİY DIDİY BYRİL İTDİY		
1416 LANDON P.O. BOX 5006 JACKSONVILLE		1418 LANDON STREET P.O. BOX 5006 JACKSONVILLE FL 32207-3128				
		·		3. Date Incorporated or Qualified 05/14/1969	3a. Date of Last Report 05/01/1996	
2. Principal P	lace of Business	2a. Mailing Address	news	4. FEI Number	Applied For	
21 / <i>7 / 6 /</i> Su <u>it</u> e, Apt	LONDON HVENNE		o municip	59-1260426	Not Applicable	
22 / / / /2 City & State	301 6006	27 P.O. Boy &	8006	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
23 /20	somether the	28 /2 / 1807V//	I F	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24 322	07 Country	29 32207 3	Country	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No	
	9. Name and Address of Curren		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Reg		
ERW	IN, ALEXANDER W.		81 Name			
4130 SAN BERNARDO JACKSONVILLE FL 32207			82 Street Addi	82 Street Address (P.O. Box Number is Not Acceptable)		
JACI	NOUNVILLE PL 3220/		83		The state of the s	
			B4 City		FL 85 Zip Code	
OTHER OF IT	to the provisions of Sections 607.050; egistered agent, or both, in the State m familiar with, and accept the obliga	of Horida. Such change was au	thorized by the corporat	oration submits this statement for the pution's board of directors. I hereby accept	respond changing its societars v	
SIGNATURE					•	
12.	Signature, typed or proxed name of registered age OFFICERS AND		tegistered Agunt signature requi-	ed when references ADDITIONS/CHANGES TO OFFICE	DATE CIDECTORO IN 40	
TITLE	PTD	DELFIE	1.1 101.6		Change Addition	
NAME	ERWIN, ALEXANDER W	220	1.2 NAME	Secretary	Onling: 21 Addition	
STREET ADDRESS	4130 SAN BERNADO		1.3 STREET ADDRESS	/	i	
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY-ST-ZIP			
TITLE		DELETE	2 · 10/LE		Change Addition	
NAME			2.2 NAME		i	
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2 4 CHY-ST-ZIP			
TITLE		☐ DELFTE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TIJLF		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.9 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - 7IP			
TITLE		☐ DELETE	5 1 1171.6		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS		i	5.3 STREET ADDRESS			
CITY-ST-ZIP		Three re	5.4 CiTY - S1 - ZiP			
TITLE		☐ DELETE	611111.6		Change L. Addition	
NAME			6.2 NAME			
STREET ADDRESS			G.3 STREET ADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		6.4 CITY - ST - ZIF			

14. I do hereby certify that the information supplied with this bling does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; 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 12 or Block 13 if changed, or on an attachment with an address.