FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(1)

PARKER JANITORIAL SERVICE, INC.

FILED May 08 1998 8:00am Secretary of State

Address	s samus anim faidt alkit rheit ibean fuit efeit Erhit dibit dibit fidit ålbji fibit
COUNTRY LANE	

Principal Place of Business Mailing Address			s annen meite dariet mitet edate inann eine mett mitet aidet dibit fifti filli (fil)			
1580 COUNTRY LANE 1580 COUNTRY LANE						
TITUSVILLE	FL 32780-4318	TITUSVILLE FL 327	80-4318		DO NOT WOITE IN T	1110 00405
					DO NOT WRITE IN T 3. Date Incorporated or Qualified	HIS SPACE
				1	01/05/1979	
2. Principa! F	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	•		59-1880111	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	· · · · · · · · · · · · · · · · · · ·			\$8.75 Additional
22		27	 		5. Certificate of Status Desired	Fee Regulred
City & Stat	le	City & State			6. Election Campaign Financing	
23		28	28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr	rent Registered Agent		1	0. Name and Address of New Registe	red Agent
PA	IRKER, SAMUEL D		81 1	ame		
	80 COUNTRY LANE		82 8	Iront Addrson	(P.O. Box Number is Not Acceptable)	
	TUSVILLE FL		02 3	i eet Audress	trio: pox inumber is not Acceptable)	
			83			
			84 0	ity	j ,	FI 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida 5	Statutes, the above-na	med corporat	tion submits this statement for the nurnor	se of changing its registered
Unice or r	registered agent, or both, in the Sta im lightlar with, and scept the ob-	ale of Florida, Such chande.	was authorized by th	corporation's	s board of directors. I hereby accept the	appointment as registered
	Xamilal In A			201	Vc p	1. 29-90
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable	(NOTE: Registered Agent si	mature required wh	PRI (einstating) DA	H-F1- 12
12.	OFFICE HS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PD	DELET	1.1 TITLE			Change Addition
NAME	Parker, Samuel D		1.2 NAME			
STREET ADDRESS	1580 COUNTRY LANE		1.3 STREET ADD	RESS		
CITY-ST-ZIP	TITUSVILLE FL		1.4 CITY - ST- ZI	,		
TITLE	STD	☐ DELET				☐ Change ☐ Addition
NAME	PARKER, DOROTHY M		2.2 NAME			
STREET ADDRESS	1580 COUNTRY LANE		23 STREET ADD	RESS		
CITY - ST - ZIP	TITUSVILLE FL		2. 4 CITY-ST-Z	p		ļ
TITLE		DELET		- 		Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADD	RESS		•
CITY-ST-ZIP			3.4 CITY-ST-Z			
TITLE		DELETI				Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADD	RESS		
CITY-ST-ZIP			44 CITY-ST-ZI			
TITLE		DELETI				Change Addition
NAME		-	52 NAME			
STREET ADDRESS			5 3 STREET ADD	aree		
CITY-ST-ZIP						j
TITLE		DELETE	5.4 CITY-ST-ZII 6.1 TITLE			Change Addition
NAME			6.2 NAME			Change Chyannan
STREET ADDRESS						
			6.3 STREET ADD			
CITY-ST-ZIP			6.4 CITY - ST - ZIE			

os not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in