

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 672870

1. Entity Name
MAINT-CO SERVICES, INC.



Principal Place of Business
11635 N W 1ST AVENUE
GAINESVILLE, FL 32607

Mailing Address
11635 N W 1ST AVENUE
GAINESVILLE, FL 32607

JK

DO NOT WRITE IN THIS SPACE

FILED

2006 APR 19 AM 10:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03012006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2005825

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CURTIS, JOHN M
11635 N W 1ST AVENUE
GAINESVILLE, FL 32607

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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 PD
NAME CURTIS, JOHN M
STREET ADDRESS 11635 NW 1ST AVE
CITY-ST-ZIP GAINESVILLE, FL

TITLE VTD
NAME CURTIS, GAIL
STREET ADDRESS 11635 NW 1ST AVE
CITY-ST-ZIP GAINESVILLE, FL

TITLE SD
NAME HALE, TASHIA C.
STREET ADDRESS 11635 NW 1ST AVENUE
CITY-ST-ZIP GAINESVILLE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

800072298778
04/27/06--01020--013 **158.75

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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:

John M. Curtis
President

04/17/06 352-332-0838

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #