

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 754379 (6)  
1. Corporation Name  
FLORIDA LAUNDERERS AND CLEANERS INCORPORATED



Principal Place of Business Mailing Address  
5318 QUEEN ST. N.  
ST PETERSBURG FL 33714 5318 QUEEN ST. N.  
ST PETERSBURG FL 33714

3. Date Incorporated or Qualified 09/26/1980 3a. Date of Last Report 02/20/1995  
4. FEI Number 59-2045259 Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAWRENCE, LOUIS L.  
5318 QUEEN ST. N.  
ST PETERSBURG FL 33714

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11 Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Louis L. Lawrence Date 3/15/96  
(NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS  
TITLE P ☐ DELETE  
NAME HAWKINS CARL  
STREET ADDRESS 14100 WALSINGHAM RD.  
CITY-ST-ZIP LARGO FL  
TITLE VP ☐ DELETE  
NAME BLAINE ALFRED  
STREET ADDRESS 1506 54 AVE. N  
CITY-ST-ZIP ST. PETERSBURG FL  
TITLE D ☐ DELETE  
NAME FONTE, SAM  
STREET ADDRESS 2312 S. MACDILL AVE.  
CITY-ST-ZIP TAMPA FL  
TITLE S ☐ DELETE  
NAME BLAINE MATT  
STREET ADDRESS 1506 54 AVE. N  
CITY-ST-ZIP ST. PETERSBURG FL  
TITLE ED ☐ DELETE  
NAME LAWRENCE, LOUIS L  
STREET ADDRESS 5318 QUEEN ST. N  
CITY-ST-ZIP ST. PETERSBURG FL  
TITLE D ☐ DELETE  
NAME PARENT, JACK  
STREET ADDRESS 2409 W. STATE RD. #434  
CITY-ST-ZIP LONGWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Carl Hawkins Date 3-15-96 813-596-1983  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)