

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90086 049 ***150.00

DOCUMENT # F01000004371 ✓ *nic* *(initials)*

1. Entity Name

National Service Industries, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1420 Peachtree Street NE
Suite, Apt. #, etc.

3. Mailing Address
1420 Peachtree Street NE
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Atlanta, GA
Zip
30309
Country
US

City & State
Atlanta, GA
Zip
30309
Country
US

4. FEI Number
77-0319365
Applied For
Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City Tallahassee FL Zip Code 32301

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.

SIGNATURE _____
Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

See Attached

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Robin Cleavenger*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Robin Cleavenger
Tax Director
4/1/02
Date
404-853-1000
Daytime Phone #

~~Attachment~~ # F07000004371

660301

NATIONAL SERVICE INDUSTRIES, INC. (CA)
1420 Peachtree Street, NE
Atlanta, GA 30309-3002
TAX ID#: 77-0319365

List of Officers:

Name:	SS #:	Title:
Brock Hattox *	587-20-5349	Chairman, Chief Executive Officer and President
Chester J. Popkowski *	025-38-2397	Senior Vice President, Chief Financial Officer, and Treasurer
Carol Ellis Morgan *	260-94-8849	Senior Vice President, General Counsel, and Secretary
K. Gene Laminack	410-27-1488	Vice President and Controller
Tera D. Pullen	283-68-2283	Associate Counsel and Assistant Secretary

Mailing Address for all Officers:

1420 Peachtree Street, NE
Atlanta, GA 30309-3002

*** Director**