


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2007 08:00 AM
Secretary of State

DOCUMENT # F06000005519 1. Entity Name LINN UNIFORMS CORPORATION OF P.G. COUNTY, INC.	
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Principal Place of Business 2132 KRATKY RD ST LOUIS, MO 63114	Mailing Address 2132 KRATKY RD ST LOUIS, MO 63114
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DO NOT WRITE IN THIS SPACE



04032007 No Chg-P CR2E034 (11/05)

4. FEI Number 52-1285633	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BUZZELL, ROBERT D JR 2132 KRATKY RD ST LOUIS, MO 63114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOS VANDERWAL, RICHARD 2132 KRATKY RD ST LOUIS, MO 63114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VANDERWAL, RICHARD 2132 KRATKY RD ST LOUIS, MO 63114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LINN, JEFFRY N 2132 KRATKY RD ST LOUIS, MO 63114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO LINN, CRAIG 2132 KRATKY RD ST LOUIS, MO 63114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WOELCKE, GERALD 5200 TOWN CENTER CIRCLE SUITE 470 BOCA RATON, FL 33486

U00000701896
04/20/07-80076-005 150.00

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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: X Robert D Buzzell CFO 4/3/07 (314) 824-2950

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #