## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H61586

FILED Apr 23, 2009 Secretary of State

Entity Name: MOSLEY STARLITE CLEANING, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
1938 N.E. STARKE, F	185TH ST	US			
·			Now Maili	ng Address:	
Current Mailing Address: N				ng Address.	
1938 N.E. <sup>.</sup> STARKE, F		US			
FEI Number:	59-2529581	FEI Number Applied For ( )	El Number Not Appl	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MEIDE, MOSES, JR. 817 N MAIN STREET JACKSONVILLE, FL 32202 US					
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.					
SIGNATUF	₽F·				
Electronic Signature of Registered Agent Date					
Election Can		cing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PDV MOSLEY, JA 1938 N.E. 18 STARKE, FL	85TH ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP MOSLEY, JE 1946 N.E. 18 STARKE, FL	B5TH ST	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition MOSLEY, ANDREW J 7369 SHINDLER DR APT 2 JACKSONVILLE, FL 32222	
Title: Name: Address: City-St-Zip:	MOSLEY, AN 7369 SHIND	(X) Delete NDREW ILOR DR APT 2 LLE, FL 32222	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S MOSLEY, LU 1952 N.E. 18 STARKE, FL	85TH ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAY MOSLEY PDV 04/23/2009