

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

**FILED**  
**Jun 05, 2003 8:00 am**  
**Secretary of State**

06-05-2003 90131 011 \*\*\*150.00

DOCUMENT # J09214

1. Entity Name  
Quality Linen Systems, Inc.



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**JUL004U**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
5128 Ashmeade Rd, Orlando, FL 32810 - Orange Co.  
3. Mailing Address  
5128 Ashmeade Road, Orlando, FL 32810 - Orange Co.

DO NOT WRITE IN THIS SPACE

City & State Orlando, FL	City & State Orlando, FL	4. FEI Number 59-2819624	Applied For Not Applicable
Zip 32810	Country Orange	Zip 32810	Country Orange
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
W Thomas Lovett PA  
Street Address (P.O. Box Number is Not Acceptable)  
801 N. Magnolia  
City  
Orlando, FL Zip Code  
32803

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 \_\_\_\_\_

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

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

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Gerald E. Skidmore 5128 Ashmeade Road Orlando, FL 32810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	James E. Skidmore 2338 Carrolwood Way Apopka, FL 32712
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary/Treasurer Gerald E. Skidmore 5128 Ashmeade Road Orlando, FL 32810
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Gerald E. Skidmore Date 6-2-03  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034B (12/02)