2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K07064

Entity Name: ONE WAY JANITORIAL, INC.

FILED Mar 20, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
% JAMES T WELLS 1689 E. ORANGESIDE RD PALM HARBOR, FL 34683				% JAMES L. WELLS 1689 E. ORANGESIDE RD PALM HARBOR, FL 34683		
Current Mailing Address:				New Mailing Address:		
% JAMES T WELLS 1689 E. ORANGESIDE RD PALM HARBOR, FL 34683				% JAMES L WELLS 1689 E. ORANGESIDE RD PALM HARBOR, FL 34683		
FEI Number:	59-2859475	FEI Number Applied For ()	FEI Number No	t Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
	AMES L. RANGESIDE F RBOR, FL 346					
The above in the State		submits this statement for the	purpose of chanç	ging its registered o	office or registered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent					Date	
Election Can	npaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (WELLS, JAME 1689 E. ORAN PALM HARBOI	GESIDE RD	Title: Name: Addres: City-St-	s:) Change () Addition	
Title: Name: Address: City-St-Zip:	D (WELLS, WENI 1689 E. ORAN PALM HARBOI	GESIDE RD	Title: Name: Addres: City-St-	s:) 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: JAMES L.WELLS PRES 03/20/2009