

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 06, 1999 8:00 am  
Secretary of State

05-06-1999 90242 027 \*\*\*150.00

DOCUMENT # K25727

1. Corporation Name

COMPLETELY CLEAN, INC.

Principal Place of Business

~~9382 W. WAUCHULA DR.  
CRYSTAL RIVER FL 32620-0007~~

Mailing Address

~~9382 W. WAUCHULA DR.  
CRYSTAL RIVER FL 34428~~  
US



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/03/1988

4. FEI Number

59-2896101

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 281 S. Honeybear Way

Suite, Apt. #, etc.

22

City & State

23 Lecanto, FL

Zip

24 34461

Country

25 US

2a. Mailing Address

26 P.O. Box 413

Suite, Apt. #, etc.

27

City & State

28 Lecanto, FL

Zip

29 34460

Country

30 US

10. Name and Address of New Registered Agent

81 Name

Lynn Dodson

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

281 S. Honeybear Way

83

84 City

Lecanto

FL

85 Zip Code

34461

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Janet Bishop - President

4-13-99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE

NAME BISHOP, JANET  
STREET ADDRESS 9382 W. WAUCHULA DR.  
CITY-ST-ZIP CRYSTAL RIVER FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Lynn Dodson ☒ Change ☐ Addition

1.2 NAME 281 S. Honeybear Way

1.3 STREET ADDRESS Lecanto, FL 34461

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lynn Dodson - President

4-13-99 352-527-9679

(NOTE: Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #

CR2E034 (11/98)

0487392