

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 30 AM 8:24

DOCUMENT # K72681 (5)

1. Corporation Name

JAYNE'S CLEANING SERVICE, INC.

Principal Place of Business

P.O. BOX 431439
BIG PINE KEY FL 33043-1439

Mailing Address

P.O. BOX 431439
BIG PINE KEY FL 33043-1439

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/10/1989

3a. Date of Last Report

05/20/1994

4. FCI Number

65-0115495

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 has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JURGENSOHN, JAYNE
5580 OVERSEAS HIGHWAY
MARATHON FL 33050**

81 Name

JAYNE JURGENSOHN

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

253 PIRATES RD

83

LITTLE TORCH KEY FL

84 City

FL

85 Zip Code

33042

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 607.0503, Florida Statutes.

SIGNATURE

Jayne Jurgensohn

(NOTE: Registered Agent signature required when registering)

2-25-95

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

JURGENSOHN, JAYNE

STREET ADDRESS

5580 US HWY

CITY ST ZIP

MARATHON FL

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

2.1 TITLE

☐ Change

☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY ST ZIP

VICE PRESIDENT

JAMES NORMAN

P.O. BOX 431439

BIG PINE KEY FL. 33043

3.1 TITLE

☐ Change

☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

SECRETARY

MARGARET DREW MILLS

P.O. BOX 431439

BIG PINE KEY FL 33043

4.1 TITLE

☐ Change

☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY ST ZIP

TREASURER

CARIDAD LOPEZ

14 KYLE WAY S.

MARATHON, FL 33050

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(a), 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.

SIGNATURE:

Jayne Jurgensohn

2-25-95

(305) 872-8866

Date

Telephone Number