

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Teresa H. Martin
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # **K85959** (0)

1. Corporation Name

CLEAN SWEEP CHIMNEY & POOL CLEANING SERVICES, IN C.

55 MAY - 1 AM 10:41

SPRINGFIELD, FLORIDA
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **% WILLIAM S. JENKINS, JR.
ROUTE 5, BOX 140
PALATKA FL 32177**

Mailing Address: **% WILLIAM S. JENKINS, JR.
ROUTE 5, BOX 140
PALATKA FL 32177**

3. Date Incorporated or Created 05/05/1989	3a. Date of Last Report 04/06/1994
4. FEI Number 59-2948638	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 adoption tax under S. 193.032, Florida Statutes. ☒ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
State Apt # etc 22	State Apt # etc 27
City & State 23	City & State 28
ZIP 24	Country 30

9. Name and Address of Current Registered Agent
**JENKINS, WILLIAM S., JR.
ROUTE 5
BOX 140
PALATKA FL 32177**

10. Name and Address of New Registered Agent
81 Name **Jenkins, William S. Jr.**
82 Street Address (P.O. Box Number is Not Acceptable) **6097 CRILL AVE**
83 City & State **Palatka FL**
84 ZIP **32177**

11. Pursuant to the provisions of Sections 607.0102 and 607.1501, 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. Thereby accept the appointment as registered agent. I am
Signature of Registered Agent: *William S. Jenkins Jr.* 4-25-95

SIGNATURE: *William S. Jenkins Jr.* 4-25-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME D JENKINS, WILLIAM S., JR	1. NAME P= President	1. NAME Same -	☒ Change ☐ Addition
Street Address ROUTE 5 BOX 140	1. STREET ADDRESS Same - 6097 CRILL AVE / K15 BOX 140	1. STREET ADDRESS Same - 6097 CRILL AVE / K15 BOX 140	☐ Change ☐ Addition
CITY & STATE PALATKA FL	1. CITY & STATE PALATKA FL	1. CITY & STATE PALATKA FL	☐ Change ☐ Addition
ZIP 32177	1. ZIP 32177	1. ZIP 32177	☐ Change ☐ Addition
NAME D JENKINS, WILLIAM S., JR	2. NAME 	2. NAME 	☐ Change ☐ Addition
Street Address 	2. STREET ADDRESS 	2. STREET ADDRESS 	☐ Change ☐ Addition
CITY & STATE 	2. CITY & STATE 	2. CITY & STATE 	☐ Change ☐ Addition
ZIP 	2. ZIP 	2. ZIP 	☐ Change ☐ Addition
NAME 	3. NAME 	3. NAME 	☐ Change ☐ Addition
Street Address 	3. STREET ADDRESS 	3. STREET ADDRESS 	☐ Change ☐ Addition
CITY & STATE 	3. CITY & STATE 	3. CITY & STATE 	☐ Change ☐ Addition
ZIP 	3. ZIP 	3. ZIP 	☐ Change ☐ Addition
NAME 	4. NAME 	4. NAME 	☐ Change ☐ Addition
Street Address 	4. STREET ADDRESS 	4. STREET ADDRESS 	☐ Change ☐ Addition
CITY & STATE 	4. CITY & STATE 	4. CITY & STATE 	☐ Change ☐ Addition
ZIP 	4. ZIP 	4. ZIP 	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 193.032(2)(b), Florida Statutes. Further, I certify that the information is included on the annual report or supplemental annual report as 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 this corporation or the recorder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of the report or on the affidavit with an address.

SIGNATURE: *William S. Jenkins Jr.* 4-25-95 904-328 0427
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
William S. Jenkins Jr