


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 01, 2005 8:00 am
Secretary of State

08-01-2005 90093 001 ****50.00

DOCUMENT # L03000055701					
1. Entity Name MARY'S CLEANING, LLC					
Principal Place of Business 193 NOLES LANE WINTER HAVEN, FL 33880			Mailing Address 193 NOLES LANE WINTER HAVEN, FL 33880		
2. Principal Place of Business 3768 Fast Trot Trail		3. Mailing Address 3768 Fast Trot Trail			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Lake Wales FL		City & State Lake Wales FL		4. FEI Number NOT APPLICABLE	
Zip 33898		Country United States		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent HOLLAND, MARY 193 NOLES LANE WINTER HAVEN, FL 33880			7. Name and Address of New Registered Agent Name Mary Holland Street Address (P.O. Box Number is Not Acceptable) 3768 Fast Trot Trail City Lake Wales FL Zip Code 33898		
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 <u><i>Mary Holland</i></u> <small>Signature, typed or printed name of registered agent and title if applicable</small>				<u><i>7/28/05</i></u> <small>DATE</small>	
Filing Fee is \$50.00 Due by September 7, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS / CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOLLAND, MARY 193 NOLES LANE WINTER HAVEN, FL 33880	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Mary Holland 3768 Fast Trot Trail Lake Wales FL 33898	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u><i>Mary Holland</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>				<u><i>7/28/05</i></u> <u><i>863-845-4465</i></u> <small>Date Daytime Phone #</small>	