


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90100 022 ***150.00

DOCUMENT # L58647 1. Entity Name COMPLETE CLEANING SERVICE OF INDIAN RIVER COUNTY, INC.			
Principal Place of Business 953 OLD DIXIE HWY B7 VERO BCH FL 32960 US		Mailing Address 4412 5TH PL SW VERO BEACH FL 32968 US	
2. Principal Place of Business - No P.O. Box # 1599 10th Avenue		3. Mailing Address Suite, Apt. #, etc. Suites B & C	
City & State Vero Beach, FL.		City & State Vero Beach, FL.	
Zip 32960	Country US	Zip 32960	Country US
6. Name and Address of Current Registered Agent KISTLER, JOHN PAUL, JR. 4412 5TH PL SW VERO BEACH FL 32968		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP PVST BRIDWELL, GAIL 200 39TH COURT VERO BEACH FL 32968	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP PVST Gail Bridwell Brattain 1599 10th Avenue, Suites B & C Vero Beach, FL. 32960	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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1st MOORE CR2E034 (10/06)

4. FEI Number **65-0187293** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gail Bridwell Brattain **Gail Bridwell Brattain** 03/08/2007 (772) 562-3585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #