## 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

## DOCUMENT # L62775

HOSPITALITY LINEN SERVICES, INC.

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90135 030 \*\*\*150.00



Principal Place of Business Mailing Address					
1701-A EASTON AVE PO BOX 617311					
ST CLOUD FL 34769		ORLANDO FL 32861 US		DO NOT WRITE IN THIS SPACE	
US		00		3. Date Incorporated or Qualifed	
				03/26/1990	
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number Applied For	
21		26		59-3004539 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		\$8.75 Additional	
22	·	27		5. Certificate of Status Desired	
City & State	and the familiary of the supplemental and	- City & State		6. Election Campaign Financing \$5.00 May Be	
23		28		Trust Fund Contribution Added to Fees	
Zip .	Country	_ '	Country	8. This corporation owes the current year Intangible	
24	25	29 30		Tersorial Troporty Tax.	
	9. Name and Address of Curre	ent Registered Agent			
	0.00		81 Name	9	
A.G.C. CO.			82 Street	et Address (P.O. Box Number is Not Acceptable)	
200 S ORANGE AVE					
Suite 2300 Orlando Fl 32801-3432			83	}	
UND	ANDO FE 32001-3432		84 City	85 Zip Code	
44 D.	the annialog of Continue 607.05	02 and 607 4509 Elorida Statutos th	above name	I I I I I I I I I I I I I I I I I I	
office or n	egistered agent, or both, in the State	Suite, Apt. #, etc. 27  City & State  City & State  Country  B. This corporation owes the current year Intangible Personal Property Tax. Yes No  Current Registered Agent  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL 85 Zip Code 2 State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and title if applicable. (NOTE: Registered Agent aignature required when reinstating)  DATE			
SIGNATURE		32801-3432  84 City  FL 85 Zip Code  sislons of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered gent, 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 with, and accept the obligations of, Section 607.0505, Florida Statutes.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  DELETE  1.1 TITLE  Change  Addition  RICHARD J.  EASTERN AVE  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP			
·				, , , , , , , , , , , , , , , , , , ,	
12. τιτιε	DPT				
NAME	KIENLE, RICHARD J.	_			
STREET ADDRESS	1701 A EASTERN AVE	1		:	
	ST CLOUD FL			~	
CITY-ST-ZIP TITLE	DVS			☐ Change ☐ Addition	
NAME	KIENLE, JUDITH A.			÷	
STREET ADDRESS	1701 A EASTERN AVE				
CITY-ST-ZIP	ST CLOUD FL				
TITLE -				Change - Addition	
NAME		_			
STREET ADDRESS				ss	
CITY-ST-ZIP					
TITLE				☐ Change ☐ Addition	
NAME		i.	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	ss .	
CITY-ST-ZIP		J.	4.4 CITY-ST-ZIP		
TITLE			5.1 TITLE	☐ Change ☐ Addition	
NAME			5.2 NAME		
STREET ADDRESS		**	5.3 STREET ADDRESS	ss	
CITY-ST-ZIP		1	5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	ss	
CITY-ST-ZiP			6.4 CITY-ST-ZIP		
		and this file - James and supplied for the		ted in Section 110 07/3/(i) Elected Statutes I further certify that the information	

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 a fustee 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 one supplement with an address, with all other like empowered.

**SIGNATURE**