

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L64439

FILED  
Jan 20, 2009  
Secretary of State

Entity Name: SIMONE CLEANING SERVICE INC.

## Current Principal Place of Business:

% ROBERT LEE FIELDER  
219 SPRING GARDEN ROAD  
SEBRING, FL 33870

## New Principal Place of Business:

## Current Mailing Address:

% ROBERT LEE FIELDER  
219 SPRING GARDEN ROAD  
SEBRING, FL 33870

## New Mailing Address:

FEI Number: 59-3008835

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FIELDER, ROBERT LEE  
219 SPRING GARDEN ROAD  
SEBRING, FL 33870 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: FIELDER, ROBERT LEE,  
Address: DPS  
City-St-Zip: SEBRING, FL

Title: S ( ) Delete  
Name: FIELDER, ROBERT LEE,  
Address: 219 SPRING GARDEN RD.  
City-St-Zip: SEBRING, FL

Title: VDM ( ) Delete  
Name: FIELDER, SIMONE C.,  
Address: 219 SPRING GARDEN RD.  
City-St-Zip: SEBRING, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: FIELDER, ROBERT LEE,  
Address: DPS  
City-St-Zip: SEBRING, FL 33870 US

Title: S (X) Change ( ) Addition  
Name: FIELDER, ROBERT LEE,  
Address: 219 SPRING GARDEN RD.  
City-St-Zip: SEBRING, FL 33870 US

Title: VDM (X) Change ( ) Addition  
Name: FIELDER, SIMONE C.,  
Address: 219 SPRING GARDEN RD.  
City-St-Zip: SEBRING, FL 33870 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT LEE FIELDER

PRES

01/20/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date