2007 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # M12009

1. Entity Name
G. WILLIE'S UNIFORMS, INC.

Principal Place of Business	Mailing Address
1407 MAHAN DR TALLAHASSEE, FL 32308	1407 MAHAN DR TALLAHASSEE, FL 32308

DO NOT WRITE IN THIS SPACE

07052007   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-2575567	Not Applicable

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

6. Name and Address of Current Registered Agent

SCHUMACHER, WILMA
1407 MAHAN DR
TALLAHASSEE, FL 32308

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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 _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00 **Due by September 14, 2007**	9. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	SCHUMACHER, GEORGE
STREET ADDRESS	2538 LEMON LANE
CITY-ST-ZIP	TALLAHASSEE, FL

TITLE	VSD
NAME	SCHUMACHER, WILMA
STREET ADDRESS	2538 LEMON LANE
CITY-ST-ZIP	TALLAHASSEE, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _Wilma Schumacher_ Wilma Schumacher 850-878-0204   7/5/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #