FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 23 AM 9:11

DOCUMENT # N93000003624 (4)

1. Corporation Name
CLEANUP & GREENUP, INC.

Principal Place of Business	Mailing Address
% ATTWOODS INC 5210 W LINEBAUGH AVE TAMPA FL 33688	PO BOX 271736 TAMPA FL 33688

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/09/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3199029 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 1425 Main St., Unit "N"	26 1425 Main Street
Suite, Apt. #, etc. 22 Unit "N"	Suite, Apt. #, etc. 27 Unit "N"
City & State 23 Dunedin, Florida	City & State 28 Dunedin, Florida
Zip 24 34698 Country 25 USA	Zip 29 34698 Country 30 USA

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
RATLIFF, JANET PETERSON CORP 5210 W LINEBAUGH AVE TAMPA FL 33625	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	ZERBE, JANICE	1.2 NAME	Pinta, Thomas	
STREET ADDRESS	1206 N PARK RD	1.3 STREET ADDRESS	100 State St.	
CITY-ST-ZIP	PLANT CITY FL 33566	1.4 CITY-ST-ZIP	Oldsmar, FL 34677	
TITLE	SD	2.1 TITLE	SD	☒ Change ☐ Addition
NAME	HAUSER, PATRICIA	2.2 NAME	Frederich, Nancy	
STREET ADDRESS	11864 BRANCH MOORING DR	2.3 STREET ADDRESS	1425 Main St., Unit "N"	
CITY-ST-ZIP	TAMPA FL 33635	2.4 CITY-ST-ZIP	Dunedin, Fl 34698	
TITLE	TD	3.1 TITLE	TD	☒ Change ☐ Addition
NAME	GUZZINO, KATHY	3.2 NAME	McCoy, Judy	
STREET ADDRESS	C/O ATTWOODS INC., 5210 LINEBAUGH AVE	3.3 STREET ADDRESS	2865 Executive Center Dr.	
CITY-ST-ZIP	TAMPA FL 33625	3.4 CITY-ST-ZIP	Clearwater, FL 34625	
TITLE	VD	4.1 TITLE	..	☐ Change ☐ Addition
NAME	LAPORTE, ANTHONY	4.2 NAME		
STREET ADDRESS	C/O ATTWOODS INC., 5210 LINEBAUGH AVE	4.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33625	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	Zerbe, Janice	5.2 NAME		
STREET ADDRESS	1206 N. Park Rd.	5.3 STREET ADDRESS		
CITY-ST-ZIP	Plant City, FL 33566	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Anthony LaPorte, V.P. 1-16-95 813-758-4225
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #

0081908