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FILED

Jan 14 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000003624 (4)

1. Corporation Name

CLEANUP & GREENUP, INC.

Principal Place of Business

Mailing Address

1425 MAIN ST.
UNIT "N"
DUNEDIN FL 346981425 MAIN ST.
UNIT "N"
DUNEDIN FL 34698-62473. Date Incorporated or Qualified
08/09/19933a. Date of Last Report
02/06/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

4. FEI Number

59-3199029

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐\$5.00 May Be
Added to Fees8. 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

PINTA, THOMAS
1425 MAIN STREET
UNIT N
DUNEDIN FL 34698

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME PINTA, THOMAS
STREET ADDRESS 100 STATE ST.
CITY-ST-ZIP OLDSMAR FL
DELETE1.1 TITLE President
1.2 NAME Sameera Haniff
1.3 STREET ADDRESS 1425 Main St., Unit N
1.4 CITY-ST-ZIP Dunedin, FL 34698
Change AdditionTITLE SD
NAME SWINT, DOROTHEA
STREET ADDRESS 1425 MAIN STREET, UNIT N
CITY-ST-ZIP DUNEDIN FL
DELETE2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
Change AdditionTITLE TD
NAME MCCOY, JUDY
STREET ADDRESS 2865 EXECUTIVE CENTER DR.
CITY-ST-ZIP CLEARWATER FL
DELETE3.1 TITLE Treasurer
3.2 NAME Marianne A. LaPorte
3.3 STREET ADDRESS 1425 Main St., Unit N
3.4 CITY-ST-ZIP Dunedin, FL 34698
Change AdditionTITLE VD
NAME LAPORTE, ANTHONY
STREET ADDRESS 1425 MAIN STREET, UNIT N
CITY-ST-ZIP DUNEDIN FL
DELETE4.1 TITLE Director
4.2 NAME Andrew Gray
4.3 STREET ADDRESS 1425 Main St., Unit N
4.4 CITY-ST-ZIP Dunedin, FL 34698
Change AdditionTITLE D
NAME ACQUAVIVA, LUCY
STREET ADDRESS 2101 SUNSET POINT ROAD, # 101
CITY-ST-ZIP CLEARWATER FL
DELETE5.1 TITLE Director
5.2 NAME Eric Theis
5.3 STREET ADDRESS 1425 Main St., Unit N
5.4 CITY-ST-ZIP Dunedin, FL 34698
Change AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DELETE6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
Change Addition

14. I do 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 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, on this attachment with an address.

SIGNATURE:

Marianne A. LaPorte, Treasurer

1/8/97

(813) 736-8361

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0069447

CR2E037 (9/96)