## **2004 NOT-FOR-PROFIT CORPORATION** \*\*\*\*ANNUAL REPORT (AR)

## **DOCUMENT # N99000000447**

1. Entity Name



Mar 09, 2004 8:00 am Secretary of State

**FILED** 

Pincipal Place of Business	THE SCHOOL MAINTENANCE EMPLOYEES AND ASSOCIATES, INC.				03-09-2004 90040 0	00 01.23
13 ACKSONVILLE FL 32205  2. Principal Place of Business  3. Mailing Address  Suite, Apt. #, etc.  City & State  Country  2. D  Country  3. Certificate of Status Desired  58.75 Addition  For Registered Agent  7. Name and Address of New Register	Principal Plac	e of Business	Mailing Address			
2. Principal Flace of Business  Suite, Apt. et etc.  Suite, Apt. etc.			580 S ELLIS ROAD			
Suite, Apt. 6, etc.  Applicable for Not						
Suite. Apt. #, etc.    Suite. Apt. #, etc.   Suite. Apt. #, etc.   MOORE   CREEGY (11/03)   City & State   City & State   4. FEI Number   59-2500851   Moore	· ·	LEE I E GEEGG	0,10,100,111,122,12,022	,5		
City & State  Ci	2. Principal Place of Business		3. Mailing Address			
Post Country   2p   Country   2p   Country   5. Certificates 59-2500851   Not Applicable   Post Additional   Post Additional   Post Recognition			Suite, Apt. #, etc.		MOORE CR2EC	)37 (11/03)
S. Name and Address of Current Registered Agent   T. Name and Address of New Registered Agent			,		4. FEI Number 59-2500851	Not Applicable
Name   T.A.   Delegal   ZIT	Zip	Country	Zip	Country	5. Certificate of Status Desired	
VICKERS, KENNETH ESQ 214 N. WASHINGTON ST JACKSONVILLE FL 32202  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. Lam familiar with, and accept the obligations of registering agent with a space of the obligations of registering agent are with a space of the obligations of registering agent are with a space of the obligations of registering agent are with a space of the obligations of registering agent are with a space of the obligations of registering agent are with a space of the obligations of registering agent are with a space of the obligations of registering agent are with a space of the obligations of registering agent are with a space of the obligations of registering agent are with a space of the obligations of registering agent are with a space of the obligation of registering agent are with a space of the obligation of registering agent are with a space of the obligation of registering agent are within a space of the obligation of registering agent are within a space of the obligation of registering agent are within a space of the obligation of registering agent are within a space of the obligation of registering agent are within a space of the obligation of registering agent and the space of the obligation of registering agent and agent are within a space of the obligation of registering agent and agent are with a space of the obligation of registering agent and agent are with a space of the obligation of registering agent and agent are with a space of the obligation of registering agent and agent are with a space of the obligation of registering agent and agent are with a space of registering agent and agent are with a space of the obligation of registering agent and agent are with a space of the obligation of registering agent and agent are with a space of the obligation of registering agent and agent and agent and agent agent are with a space of the obligation of registering agent and agent are		6. Name and Address of Current	Registered Agent			
214 N. WASHINGTON ST JACKSONVILLE FL 32202  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 registering agent.  SIGNATURE  SIGNATU	- 1/10	ZEDO IZENNICTU ECO		- 1 7	17) 6 6 7	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE    Signature   Signatu	214	N WASHINGTON ST	<del></del>	Street Add	ress (P.O. Box Number is Not Acceptable)	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.    Signature				Y-2	24 RAST MONTOE STEET	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.    Signature	<u>.</u>			City	it would F	Zip Code
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Trust Fund Contribution.    Added to Fees   Florida Department of State		Signature, typegromprinted name of registered agent	220.535-2888-1		required when reinstating) / DATE	:
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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 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 617, 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:

Steven D. Cude Steven D. Cr. Lever Signature and typed or printed name of signing officer or director