

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P000000076581. Entity Name

Entity Name
 TiMESHARE APT, CLEANING CO.



FILED Feb 08, 2008 08:00 AN Secretary of State

Principal Place of Business

2841 REGENT CRESCENT SOUTH DAYTONA, FL 32119 Mailing Address

P O BOX 7554 DAYTONA, FL 32116



DO NOT WRITE IN THIS SPACE

02052008 No Chg-P CR2E

CR2E034 (11/05)

4. FEI Number 59-3619238

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LABRECHE, J 2841 REGENT CRESCENT DAYTONA BEACH, FL 32119

DO NOT WRITE IN THIS SPACE

	. 52. 13. 1, 12. 52. 13			IN T	HIS SPACE	
8. The above the obligat	named entity submits this statement for the piions of registered agent.	urpose of changing its registere	ed office or registered	d agent, or both	, in the State of Florida. I am familiar with, an	d accept
SIGNATURE_	, Signature, typed or printed name of registered agent and title it	applicable. (NOTE: Registered	d Agent signature required w	rhon reinstating)	DATE	
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	~	0 May Be		
10.'.	OFFICERS AND DIREC	TORS		1	a. Or the terms	17
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD . LABRECHE, JACQUELINE T 2841 REGENT CRESCENT SOUTH DAYTONA, FL 32119			.: 1		
NAME ****** STREET ADDRESS CITY-ST-ZIP	D LABRECHE, LUC 866 GAZELL TRAIL WINTER SPRINGS, FL 32708		· • • · · ·	, ;	000000820178 02/18/08-80018-010 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO I	NOT WRITE	
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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:

STREET ADDRESS CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

02-05-08 Date Days