## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000042823

City-St-Zip: GAINESVILLE, FL 32608

Entity Name: LOWE'S CLEANING SERVICE INC.

FILED Jan 12, 2009 Secretary of State

Littly Nai	IIIE. LOVVES CLEANING SERVICE, III	vC.
Current Principal Place of Business:		New Principal Place of Business:
	77TH STREET LLE, FL 32608	
Current M	lailing Address:	New Mailing Address:
	77TH STREET LLE, FL 32608	
FEI Number	: 59-3643880 FEI Number Applied For (	( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and	Address of Current Registered Age	ent: Name and Address of New Registered Agent:
LOWE, DO 7219 SW 7 GAINESVI	DN G 77TH STREET LLE, FL 32608 US	
	named entity submits this statement fo e of Florida.	or the purpose of changing its registered office or registered agent, or both,
SIGNATU		
Election Car	Electronic Signature of Registere mpaign Financing Trust Fund Contribution (	· ·
	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	VP ( ) Delete LOWE, DON G 7219 SW 77 ST. GAINESVILLE, FL 32608	Title: CEO (X) Change ( ) Addition Name: LOWE, DON G Address: 7219 SW 77 ST. City-St-Zip: GAINESVILLE, FL 32608
Title: Name: Address: City-St-Zip:	P () Delete LOWE, CAROL L 7219 SW 77TH STREET GAINESVILLE, FL 32608	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	S () Delete LOWE, MARTHA N 7219 SW 77TH STREET GAINESVILLE, FL 32608	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: Name: Address:	T () Delete LOWE, DON G JR 7219 SOI ITHWEST 77 STREET	Title: ( ) Change ( ) Addition Name: Address:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DON G LOWE CEO 01/12/2009