

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P00000104165

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** FLEET PRESSURE WASHING, INC.

**Current Principal Place of Business:**

118 JACKSON ROAD #5  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

10601 ALTA DRIVE  
JACKSONVILLE, FL 32226

**Current Mailing Address:**

PO BOX 350907  
JACKSONVILLE, FL 32235

**New Mailing Address:**

**FEI Number:** 59-3699592

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JONES, THERESA A  
731 DUVAL STATION ROAD  
SUITE 107-124  
JACKSONVILLE, FL 32218 US

**Name and Address of New Registered Agent:**

JONES, THERESA A  
10601 ALTA DRIVE  
JACKSONVILLE, FL 32226 US

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.

SIGNATURE: THERESA A JONES

02/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD  
Name: JONES, JAMES R  
Address: 10601 ALTA DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VTD  
Name: JONES, THERESA A  
Address: 10601 ALTA DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

I hereby 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 all other like empowered.

SIGNATURE: JAMES R JONES

JRJ

02/09/2012

Electronic Signature of Signing Officer or Director

Date