

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 22, 2001 8:00 am
Secretary of State

08-22-2001 90001 016 ***158.75

DOCUMENT # P00000106209

1. Entity Name

KLEEN BEE'S GENERAL SERVICES INC.

Principal Place of Business

**2710 DEL PRADO BLVD. STE 2-200
 CAPE CORAL FL 33904**

Mailing Address

**2710 DEL PRADO BLVD. STE 2-200
 CAPE CORAL FL 33904**

2. Principal Place of Business

**4827 Manor Ct.
 Suite, Apt. #, etc.
 #38**

3. Mailing Address

**2710 Del Prado Blvd S
 Suite 2-200**

City & State

Cape Coral, FL

City & State

Cape Coral, FL

4. FEI Number

65-1054441

Applied For

Not Applicable

Zip

33904

Country

USA

Zip

33904

Country

USA

5. Certificate of Status Desired ☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

BARTON, DOREEN A

**2710 DEL PRADO BLVD, STE 2-200
 CAPE CORAL FL 33904**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$550.00
 After September 12, 2001 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **BARTON, DOREEN A**
 STREET ADDRESS **2710 DEL PRADO BLVD, STE 2-200**
 CITY-ST-ZIP **CAPE CORAL FL 33904**

TITLE **D** ☐ Delete
 NAME **BURNS, TODD F**
 STREET ADDRESS **2710 DEL PRADO BLVD, STE 2-200**
 CITY-ST-ZIP **CAPE CORAL FL 33904**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Doreen A. Barton** **DOREEN A. BARTON**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-17-01

Date

281-4144

Daytime Phone #

CR2E034 (5/01)

Attachment
P000000106209
A082235

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL. 32302-1500

TO WHOM IT MAY CONCERN,

AUGUST 17, 2001

THIS LETTER IS TO INFORM YOUR OFFICE THAT I DID NOT RECEIVE A FIRST NOTICE ABOUT THIS FEE AND ENCLOSED IS THE FEE OF 150.00 AS REQUIRED BY YOUR OFFICE. I RECENTLY WROTE AN E-MAIL TO CORPHELP@MAIL.DOS.STATE.FL.US AND WAS ADVISED TO SEND THIS PAYMENT WITH A LETTER EXPLAINING THAT I DID NOT RECEIVE A FIRST NOTICE. THE LATE FEE HAS BEEN WAIVED. I APPRCIATE THIS CONSIDERATION VERY MUCH. I WILL PAY IT NEXT YEAR IN JANUARY AS REQUIRED. THANK YOU FOR YOUR TIME.

DOREEN BARTON
KLEEN BEES GEN. SVCS. INC.
2710 DEL PRADO BLVD. SOUTH
SUITE 2-200
CAPE CORAL, FL 33904
941-281-4144

Doreen Barton
8/17/01

Note: also am paying \$ 8.75 fee for Cert. of Status
Total enclosed \$158.75.