## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P01000043585

FILED Apr 16, 2009 Secretary of State

Entity Name: XTREME CLEAN PROFESSIONAL FLOOR CARE, INC.

**New Principal Place of Business: Current Principal Place of Business:** 211 ALLEN MEMORIAL WAY PORT ST. JOE, FL 32456 **Current Mailing Address: New Mailing Address:** P.O. BOX 852 PORT ST. JOE, FL 32457 FEI Number: 59-3716005 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOCK, MICHAEL L 122 BRIDGEPORT LANE PORT ST. JOE, FL 32456 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition MOCK, MICHAEL L Name: Name: 122 BRIDGEPORT LANE Address: Address: City-St-Zip: PORT ST. JOE, FL 32456 City-St-Zip: ( ) Delete Title: VSD Title: () Change () Addition Name: COLLIER, CATHERINE L Name: 211 ALLEN MEMORIAL WAY Address: Address: PORT ST. JOE, FL 32456 City-St-Zip: City-St-Zip:

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.

SIGNATURE: CATHERINE L COLLIER VSD 04/16/2009