

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000065187

FILED
Apr 27, 2004
Secretary of State

Entity Name: NORTHEAST FLORIDA CLEANING AND RESTORATION INC.

Current Principal Place of Business:

2300 JERNIGAN ROAD
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

P.O BOX 47616
JACKSONVILLE, FL 322477616

New Mailing Address:

FEI Number: 59-3724628

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLMES, MYRON M
216 SIMMONS TRAIL WEST
GREEN COVE SPRINGS, FL 32043

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: HOLMES, MARY L
Address: 216 SIMMONS TRAIL WEST
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: VP () Delete
Name: HOLMES, MYRON M
Address: 216 SIMMONS TRAIL WEST
City-St-Zip: GREEN COVE SPRINGS, FL 32043

Title: S () Delete
Name: LOSSEN, BRIAN M
Address: 216 SIMMONS TRAIL WEST
City-St-Zip: GREEN COVE SPRINGS, FL 32043

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MYRON M. HOLMES

VP

04/27/2004

Electronic Signature of Signing Officer or Director

Date