## 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000052011

Entity Name: THE LAUNDRY LADY, INC.

FILED Jun 21, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

11751 S.W. DALLAS DRIVE 4435 TAMIAMI TRAIL

LAKE SUZY, FL 34269 PORT CHARLOTTE, FL 33980

**Current Mailing Address: New Mailing Address:** 

11751 S.W. DALLAS DRIVE 4435 TAMIAMI TRAIL

LAKE SUZY, FL 34269 PORT CHARLOTTE, FL 33980

FEI Number: 68-0504761 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:

SIEGEL, GLENN N ESQ 18501 MURDOCK CIRCLE SUITE 304

PORT CHARLOTTE, FL 33948 US

GOULD, SCOTT A 4435 TÁMIAMI TRAIL PORT CHARLOTTE, FL 33980 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: SCOTT A. GOULD 06/21/2005

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition GOULD, GLEN GOULD, SCOTT A Name: Name: 11751 S.W. DALLAS DRIVE Address: 4435 TAMIAMI TRAIL Address:

City-St-Zip: LAKE SUZY, FL 34269 City-St-Zip: PORT CHARLOTTE, FL 33980

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: GOULD, JANET H Address: Address: 4435 TAMIAMI TRAIL PORT CHARLOTTE, FL 33980 City-St-Zip: 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 Statutés. 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: SCOTT A GOULD 06/21/2005 D