

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000018752

FILED
Apr 29, 2004
Secretary of State

Entity Name: COUNTRY VILLA LAUNDROMAT, INC.

Current Principal Place of Business:

5435 LEWELLYN RD
LAKELAND, FL 33810

New Principal Place of Business:

5435 LEWELLYN RD
LAKELAND, FL 33810 US

Current Mailing Address:

P.O.BOX 711
LAKELAND, FL 33849

New Mailing Address:

P.O.BOX 711
LAKELAND, FL 33849 US

FEI Number: 59-3766520

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AIRTH, H. ADAM JR
500 S FLORIDA AVE STE 800
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

AIRTH, H. ADAM JR
500 S FLORIDA AVE
STE 800
LAKELAND, FL 33801 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:

04/29/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SPIVEY, SHIRLEY J
Address: 5425 LEWELLYN RD
City-St-Zip: LAKELAND, FL 33810

Title: D () Delete
Name: SPIVEY, OLIN J
Address: 5425 LEWELLYN RD
City-St-Zip: LAKELAND, FL 33810

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: SPIVEY, SHIRLEY J
Address: 5435 LEWELLYN RD
City-St-Zip: LAKELAND, FL 33810 US

Title: DVP (X) Change () Addition
Name: SPIVEY, OLIN J
Address: 5435 LEWELLYN RD
City-St-Zip: LAKELAND, FL 33810 US

Title: VP () Change (X) Addition
Name: WATSON, DANNY J
Address: 5435 LEWELLYN RD
City-St-Zip: LAKELAND, FL 33810 US

Title: VP () Change (X) Addition
Name: SPIVEY, LETTY J
Address: 5435 LEWELLYN RD
City-St-Zip: LAKELAND, FL 33810 US

Title: ST () Change (X) Addition
Name: WATSON, APRIL S
Address: 5435 LEWELLYN RD
City-St-Zip: LAKELAND, FL 33810 US

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: LETTY J SPIVEY

VP

04/29/2004

Electronic Signature of Signing Officer or Director

Date