

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134307

FILED
May 09, 2005
Secretary of State

Entity Name: ELIMINATOR PRESSURE WASHING, INC.

Current Principal Place of Business:

7791 REFLECTION COVE DR.
#305
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

14831 PARKLAKE DR #205
FT MYERS, FL 33919

New Mailing Address:

7791 REFLECTION COVE DR
#305
FT MYERS, FL 33907

FEI Number: 36-4545351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAYTON, KEITH C
14831 PARKLAKE DR #205
FT MYERS, FL 33919 US

Name and Address of New Registered Agent:

CLAYTON, KEITH C
7791 REFLECTION COVE DR
#305
FT MYERS, FL 33907 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: KEITH C CLAYTON

05/09/2005

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:

Title: DP () Delete
Name: CLAYTON, KEITH C
Address: 14831 PARKLAKE DR #205
City-St-Zip: FT MYERS, FL 33919

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CLAYTON, KEITH C
Address: 7791 REFLECTION COVE DR #305
City-St-Zip: FT MYERS, FL 33907

Title: VP () Change (X) Addition
Name: SHRUM, TOM
Address: 4714 FOREST GLEN DRIVE
City-St-Zip: FORT MYERS, FL 33903

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: KEITH C CLAYTON

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05/09/2005

Electronic Signature of Signing Officer or Director

Date