2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000143468

1. Entity Name
AMERICAN MAID PROFESSIONAL CLEANING SERVICES, INC.

Principal Place of Business	Mailing Address
2753 SMITHTOWN DR LAKELAND, FL 33801	2753 SMITHTOWN DR LAKELAND, FL 33801

DO NOT WRITE IN THIS SPACE

05012006 No Chg-P CR2E034 (11/05)

4. FEI Number
57-1193691

☐ Applied For
☐ Not Applicable

6. Certificate of Status Desired ☐ $5.75 Additional Fee Required

5. Name and Address of Current Registered Agent

FAY, ELIZABETH A
2753 SMITHTOWN DR
LAKELAND, FL 33801

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent's signature required when signing)

FILE NOW!!! FEE IS $550.00
Due by September 8, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	FAY, ELIZABETH A
STREET ADDRESS	2753 SMITHTOWN DR
CITY-ST-ZIP	LAKELAND, FL 33801
TITLE	V
NAME	SPEARS, PAULA
STREET ADDRESS	1510 OPTIMIST DR
CITY-ST-ZIP	LAKELAND, FL 33801
TITLE	T
NAME	DOOLEY, LYNN
STREET ADDRESS	11 TENNESSEE LN
CITY-ST-ZIP	AUBURNDALE, FL 33823
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U08000060676
05/18/06-80049-005 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Elizabeth A. Fay 05/01/06
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date