

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025352

FILED  
Apr 13, 2007  
Secretary of State

**Entity Name:** PANHANDLE PRESSURE CLEANING, INC.

**Current Principal Place of Business:**

6413 DOVE RD  
YOUNGSTOWN, FL 32466

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1063  
YOUNGSTOWN, FL 32466

**New Mailing Address:**

**FEI Number:** 41-2123678

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHURCHWELL, JANET  
4152 LEISURE LAKES DR  
CHIPLEY, FL 32428 US

**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: P ( ) Delete  
Name: TURNER, WILLIAM  
Address: PO BOX 1063  
City-St-Zip: YOUNGSTOWN, FL 32466

Title: D ( ) Delete  
Name: TURNER, JANIE  
Address: PO BOX 1063  
City-St-Zip: YOUNGSTOWN, FL 32466

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 Chapter 119, 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:** WILLIAM E. TURNER

OWNE

04/13/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date