

**2009 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jun 26, 2009  
Secretary of State**

DOCUMENT# P04000140359

Entity Name: CINDY MILLER CLEANING INC.

**Current Principal Place of Business:**

90 EMILY LANE  
CRAWFORDVILLE, FL 32327

**New Principal Place of Business:**

**Current Mailing Address:**

90 EMILY LANE  
CRAWFORDVILLE, FL 32327

**New Mailing Address:**

FEI Number: 20-1733221      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BENFIELD, RON  
58 SIOUX CIRCLE  
HAVANA, FL 32333      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

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: P ( ) Delete  
Name: MILLER, CYNTHIA  
Address: 90 EMILY LANE  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: V ( ) Delete  
Name: JOHNSON, DIANE  
Address: 90 EMILY LANE  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: S ( ) Delete  
Name: CLENNEY, BRENDA  
Address: 90 EMILY LANE  
City-St-Zip: CRAWFORDVILLE, FL 32327

Title: T ( ) Delete  
Name: DANSBY, TAMMY  
Address: 90 EMILY LANE  
City-St-Zip: CRAWFORDVILLE, FL 32327

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: CYNTHIA MILLER

P

06/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date