

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008 8:00 am
Secretary of State

01-25-2008 90028 032 ***150.00

DOCUMENT # P05000005070

1. Entity Name
FANT-TASTIC CLEANING SERVICES, INC.



Principal Place of Business
**503 LAKE SUMNER DR
GROVELAND, FL 34736**

Mailing Address
**503 LAKE SUMNER DR
GROVELAND, FL 34736**

400107



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01142008

Chg-P

CR2E034 (12/06)

4. FEI Number
20-2107312

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**WILLIS-FANT, LETITIA R
503 LAKE SUMNER DR
GROVELAND, FL 34736**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **WILLIS-FANT, LETITIA R**
STREET ADDRESS **503 LAKE SUMNER DR**
CITY-ST-ZIP **GROVELAND, FL 34736**

TITLE **V** ☐ Delete
NAME **FANT, EUGENE JR.**
STREET ADDRESS **503 LAKE SUMNER DR**
CITY-ST-ZIP **GROVELAND, FL 34736**

TITLE **S** ☒ Delete
NAME **FANT, TAMARA**
STREET ADDRESS **2601 SOUTHWEST ARCHER RD APT 123**
CITY-ST-ZIP **GAINESVILLE, FL 32612**

TITLE **Board of Directors** ☐ Delete
NAME **DR Gloria Love**
STREET ADDRESS **4949 LAKE BLVD RD**
CITY-ST-ZIP **West Bloomfield, Michigan 48323**

TITLE **Board of Directors** ☐ Delete
NAME **Vince E. Willis**
STREET ADDRESS **183 COMPASS RD**
CITY-ST-ZIP **Groveland, FL 34736**

TITLE **Secretary** ☐ Delete
NAME **Nichole A. Fant**
STREET ADDRESS **503 LAKE SUMNER DR**
CITY-ST-ZIP **Groveland, FL 34736**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Letitia R. Willis-Fant* 1-14-08 407-383-201
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #