

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000050696

FILED
Aug 02, 2006
Secretary of State

Entity Name: SEMINOLE HOME CLEANING SERVICES, INC.

Current Principal Place of Business:

6823 17TH LANE NORTH
ST. PETERSBURG, FL 33702

New Principal Place of Business:

Current Mailing Address:

6823 17TH LANE NORTH
ST. PETERSBURG, FL 33702

New Mailing Address:

FEI Number: 76-0803652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASKIN, LYNN
6823 17TH LANE NORTH
ST. PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

GASKIN, LYNNE
6823 17TH LANE NORTH
ST. PETERSBURG, FL 33702 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: LYNNE GASKIN

08/02/2006

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: DPVP () Delete
Name: GASKIN, E. LYNN
Address: 6823 17TH LANE NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

Title: T () Delete
Name: GASKIN, E. LYNN
Address: 6823 17TH LANE NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPVP (X) Change () Addition
Name: GASKIN, E. LYNNE
Address: 6823 17TH LANE NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

Title: T (X) Change () Addition
Name: GASKIN, E. LYNNE
Address: 6823 17TH LANE NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

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: LYNNE GASKIN

DPVP

08/02/2006

Electronic Signature of Signing Officer or Director

Date