

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000059986

FILED
Feb 06, 2006
Secretary of State

Entity Name: ANGELINE M. LEWIS CLEANING SERVICE INC.

Current Principal Place of Business:

3093 NW HOLLY RD.
DUNNELLON, FL, 34431

New Principal Place of Business:

4130 SW 133RD LOOP
OCALA, FL 34473

Current Mailing Address:

3093 NW HOLLY RD.
DUNNELLON, FL, 34431

New Mailing Address:

4130 SW 133RD LOOP
OCALA, FL 34473

FEI Number: 20-2733149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEWIS, ANGELINE M
3093 NW HOLLY RD.
DUNNELLON, FL 34431 US

Name and Address of New Registered Agent:

LEWIS, ANGELINE M
4130 SW 133RD LOOP
OCALA, FL 34473 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:

02/06/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: O () Delete
Name: LEWIS, ANGELINE M
Address: 3093 NW HOLLY RD.
City-St-Zip: DUNNELLON, FL, 34431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: LEWIS, ANGELINE M
Address: 4130 SW 133RD LOOP
City-St-Zip: OCALA, FL 34473

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: ANGELINE M. LEWIS

O

02/06/2006

Electronic Signature of Signing Officer or Director

Date