

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000026759

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: CLEAN N' FLUFFY LAUNDROMAT, INC.

## Current Principal Place of Business:

2660 OLD BAINBRIDGE RD UNIT 501  
TALLAHASSEE, FL 32303

## New Principal Place of Business:

2660 OLD BAINBRIDGE RD UNIT 501  
501  
TALLAHASSEE, FL 32303

## Current Mailing Address:

2660 OLD BAINBRIDGE RD UNIT 501  
TALLAHASSEE, FL 32303

## New Mailing Address:

FEI Number: 26-2440289      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LEVINE, MARK S  
245 E VIRGINIA STREET  
TALLAHASSEE, FL 32301      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: CPO ( ) Delete  
Name: COLEY, GEORGIA M  
Address: 2660 OLD BAINBRIDGE RD., #501  
City-St-Zip: TALLAHASSEE, FL 32303

Title: T ( ) Delete  
Name: GERALD, TANGALA Y  
Address: 831 SWAMP CREEK RD.  
City-St-Zip: WHICHAM, GA

Title: S ( ) Delete  
Name: MITCHELL, LORRAIN D  
Address: 16824 N.W. 25TH AVE.  
City-St-Zip: MIAMI, FL 33056

## 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:

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: GEORGIA MAE COLEY

CPO

04/30/2008

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

\_\_\_\_\_  
Date