

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000097544

FILED  
Apr 13, 2007  
Secretary of State

Entity Name: C & K CLEANING SERVICES, INC

## Current Principal Place of Business:

39042 7TH AVENUE  
ZEPHYRHILLS, FL 33542

## New Principal Place of Business:

## Current Mailing Address:

39042 7TH AVENUE  
ZEPHYRHILLS, FL 33542

## New Mailing Address:

FEI Number: 32-0190617

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALLEN, CONNIE J  
39042 7TH AVENUE  
ZEPHYRHILLS, FL 33542 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: P ( ) Delete  
Name: ALLEN, CONNIE J  
Address: 39042 7TH AVENUE  
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VP ( ) Delete  
Name: ALLEN, MELVIN  
Address: 39042 7TH AVENUE  
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: TREA ( ) Delete  
Name: GILLISPIE, LEASA K  
Address: 39740 TOWNSEND ROAD  
City-St-Zip: DADE CITY, FL 33525

Title: SEC ( ) Delete  
Name: GILLISPIE, LEASA K  
Address: 39740 TOWNSEND ROAD  
City-St-Zip: DADE CITY, FL 33525

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: ALLEN, KELLY M  
Address: 39042 7TH AVENUE  
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: SEC (X) Change ( ) Addition  
Name: GILLISPIE, LEASA K  
Address: 39740 TOWNSEND ROAD  
City-St-Zip: DADE CITY, FL 33525

Title: TREA (X) Change ( ) Addition  
Name: ALLEN, MELVIN J  
Address: 39042 7TH AVENUE  
City-St-Zip: ZEPHYRHILLS, FL 33542

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: CONNIE J ALLEN

PRES

04/13/2007

Electronic Signature of Signing Officer or Director

Date