

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000013390

Entity Name: ALL-JAX LINEN SERVICE, INC.

**FILED**  
**Apr 14, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1905 WALNUT ST.  
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

**Current Mailing Address:**

1905 WALNUT ST.  
JACKSONVILLE, FL 32206

**New Mailing Address:**

FEI Number: 59-3364466

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RAINES, J.H.  
1905 WALNUT ST.  
JACKSONVILLE, FL 32206 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RAINES, J.H.  
Address: 1905 WALNUT ST.  
City-St-Zip: JACKSONVILLE, FL 32206

Title: T/S/  
Name: RAINES, K.A.  
Address: 3126 STADJUM DR.  
City-St-Zip: TALL, FL 32086

I hereby 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 all other like empowered.

SIGNATURE: JAMES H. RAINES

PRES

04/14/2012

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

\_\_\_\_\_  
Date