FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

ANNUAL REPORT
1995

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 28 PM 4:16

DOCUMENT # P93000087553 (2)

1. Corporate Name

PIONEER JANITORIAL SERVICE OF SUWANNEE VALLEY, I NC.

Principal Place of Business	Mailing Address
RTE 7, BOX 482 LIVE OAK FL 32060	RTE 7, BOX 482 LIVE OAK FL 32060

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/01/1994
3a. Date of Last Report: Not In Data

2. Principal Place of Business (21):
2a. Mailing Address (26):

4. FEI Number: 59-3217900 ☐ Applied For ☐ Not Applicable

State, Apt. #, etc. (22):
Suite, Apt. #, etc. (27):

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

City & State (23):
City & State (28):

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

Zip (24): Country (25): Zip (29): Country (30):

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

JOHNSON, JOSEPH H
RTE 7, BOX 482
LIVE OAK FL 32060

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Joseph H Johnson (Carol H Johnson) President DATE: 2-17-95
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.1 D 12.2 JOHNSON, CAROL A 12.3 RTE 7, BOX 482 12.4 LIVE OAK FL 32060	13.1 Assistant Vice Pres ☐ Change ☒ Addition 13.2 Richard M. Johnson 13.3 13.4 Route 7, Box 482, Live Oak, FL 32060
12.1 D 12.2 JOHNSON, JOSEPH H 12.3 RTE 7, BOX 482 12.4 LIVE OAK FL 32060	13.1 D ☐ Change ☑ Addition 13.2 Bryan P. Johnson 13.3 Route 7 Box 482 13.4 Live Oak, FL 32060
12.1 D 12.2 JOHNSON, MONICA D 12.3 RTE 7, BOX 482 12.4 LIVE OAK FL 32060	13.1 ☐ Change ☐ Addition 13.2 13.3 13.4
12.1 12.2 12.3 12.4	13.1 ☐ Change ☐ Addition 13.2 13.3 13.4
12.1 12.2 12.3 12.4	13.1 ☐ Change ☐ Addition 13.2 13.3 13.4
12.1 12.2 12.3 12.4	13.1 ☐ Change ☐ Addition 13.2 13.3 13.4

14. I further certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: Joseph H Johnson [Joseph H Johnson] 2-17-95 904 362-3845
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0006423 CP