2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000081288

Address:

City-St-Zip:

VERO BEACH, FL 32967

Entity Name: TREASURE COAST WINDOW CLEANING, INC.

FILED Feb 28, 2008 Secretary of State

			,			
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
6765 51ST VERO BE	AVENUE ACH, FL 3296	7				
Current Mailing Address:			New Maili	New Mailing Address:		
6765 51ST AVENUE VERO BEACH, FL 32967				P.O. BOX 1632 VERO BEACH, FL 32960		
FEI Number: 65-0531513 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and	Address	of New Registered Agent:	
6765 51ST	SKI, DONALD F AVENUE ACH, FL 3296					
	named entity s e of Florida.	submits this statement for the	purpose of changing i	ts registere	d office or registered agent, or both,	
SIGNATU	RE:					
		ic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	DPTS () BURZYNSKI, D 6765 51ST AVE VERO BEACH,	NUE	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () BURZYNSKI, D 6765 51ST AVE VERO BEACH,	NUE	Title: Name: Address: City-St-Zip:	1300 3RD A	(X) Change () Addition I, DONALD S IVE APT. 107 CH, FL 32960	
Title: Name: Address: City-St-Zip:	SEC. () BURZYNSKI, KI 6765 51ST AVE VERO BEACH,	NUE	Title: Name: Address: City-St-Zip:	6765 51ST	(X) Change () Addition I, JONATHAN AVENUE CH, FL 32967	
Title: Name: Address:	DIR (X) BURZYNSK, JC 6765 51 AVE	Delete NATHAN	Title: Name: Address:		() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: DONALD R BURZYNSKI **PRES** 02/28/2008