2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006 8:00 am
Secretary of State
04-03-2006 90396 050 ***150.00

DOCUMENT # P95000060806

1. Entity Name
DUST TILL DAWN JANITORIAL SERVICE, INC.

Principal Place of Business	Mailing Address
1520 CURLEW AVE NAPLES, FL 34102 US	~~1520 CURLEW AVE~~ ~~NAPLES, FL 34102 US~~

03222006 Chg-P CR2E034 (11/05)

2. Principal Place of Business	3. Mailing Address
	2005 HIGH RIDGE RD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: LOUISVILLE, KY
Zip / Country	Zip: 40207 / Country

4. FEI Number: 65-0604198 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GATLIN, GREGORY F
~~1520 CURLEW AVE~~
~~NAPLES, FL 34012~~

GATLIN Gregory F
1520 CURLEW AVE
Naples, FL. 34102

7. Name and Address of New Registered Agent

Name: GREGORY F GATLIN
Street Address (P.O. Box Number is Not Acceptable): 1520 CURLEW AVE
City: NAPLES, FL ~~FL~~ Zip Code: 34102

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] 3/28/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GATLIN, GREGORY F ~~1520 CURLEW AVE~~ ~~NAPLES, FL 34102~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 2005 HIGH RIDGE RD LOUISVILLE, KY 40207
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GATLIN, JANET M ~~1520 CURLEW AVE~~ ~~NAPLES, FL 34102~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 2005 HIGH RIDGE RD LOUISVILLE, KY 40207
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 3/28/06 ~~239 598 4747~~ 502-895-4060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

502 895 4060

ATTACHMENT

~~#P~~ 66010670
~~#P~~ 9500026080 6

I MADE The
CORRECTION AS PER
A PHONE CALL.
HOPE I DID IT RIGHT
PHONE 502-895-4060
Greg Gatlin