

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000026106

FILED
Jan 11, 2008
Secretary of State

Entity Name: THE CLEANING PRO AT EMERALD COAST, INC.

Current Principal Place of Business:

7090 CALLE HERNANDO DESOTO
NAVARRE, FL 32566

New Principal Place of Business:

Current Mailing Address:

7090 CALLE HERNANDO DESOTO
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 59-3367166

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTOS, MELODY
7090 CALLE HERNANDO DESOTO
NAVARRE, FL 32566 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: V (X) Delete
Name: WILCOX, PAMELA
Address: 2114 REGISTER LANE
City-St-Zip: NAVARRE, FL 32566

Title: S () Delete
Name: BOWMAN, SYLVIE M
Address: 9536 BRENTWOOD BLVD
City-St-Zip: NAVARRE, FL 32566

Title: P () Delete
Name: SANTOS, MELODY W
Address: 7090 CALLE HERNANDO DESOTO
City-St-Zip: NAVARRE, FL 32566

Title: T () Delete
Name: WANGERIN, KATHY
Address: 413 WOODROW STREET
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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.

SIGNATURE: MELODY W. SANTOS

PRES

01/11/2008

Electronic Signature of Signing Officer or Director

Date