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FILED

Apr 08 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000048709 (5)

1. Corporation Name

UNIFORMS STAT. INC.



Principal Place of Business

Mailing Address

P O BOX 229  
FERNANDINA BEACH FL 32035

P O BOX 229  
FERNANDINA BEACH FL 32035-0229

1124 S. 14th St  
Fernandina Bch. Fla. 32034

1124 S. 14th St  
fernandina Beach, Fla 32034

2. Principal Place of Business

21 1124 S. 14th St  
Fernandina Beach, FL 32034

Suite, Apt. #, etc.

22 City & State

23

Zip

24

Country

25

Nassau

2a. Mailing Address

26 1124 S. 14th St  
fernandina Bch. FL 32034

Suite, Apt. #, etc.

27 City & State

28

Zip

29

Nassau

Country

30

Nassau

9. Name and Address of Current Registered Agent

DAVID, CLYDE W  
20 SOUTH ST  
FERNANDINA BEACH FL 32034

3. Date Incorporated or Qualified

06/05/1996

3a. Date of Last Report

0

4. FEI Number

59-338-2951

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

Jacquelyn E. Grobe

82 Street Address (P.O. Box Number is Not Acceptable)

1124 S. 14th St.

83

84

Fernandina Beach

85

Zip Code

32034

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

Jacquelyn E. Grobe V.P.

DATE

4/3/97

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE D  
NAME ANDREWS, VIRGINIA  
STREET ADDRESS 4209 WILDER BLVD  
CITY-ST-ZIP FERNANDINA BEACH FL 32034

☐ DELETE

TITLE D  
NAME GRUBE, JACQUELYN E  
STREET ADDRESS P O BOX 229 N/A  
CITY-ST-ZIP FERNANDINA BEACH FL 32035

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address.

SIGNATURE:

Jacquelyn E. Grobe V.P.

4/3/97 904-2101-10886

CR2E034 (9/96)