

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 12 1997 8:00am
Secretary of State

DOCUMENT # **P96000075465 (0)**

1. Corporation Name

BAILEY/MARSH CLEANING SERVICES, INC.



Principal Place of Business

Mailing Address

**2954B PARK ST
JACKSONVILLE FL 32205**

**2954B PARK ST
JACKSONVILLE FL 32205-8032**

2. Principal Place of Business

21 2954 B PARK ST

Suite, Apt. #, etc.

22

City & State

23 JACKSONVILLE, FL.

Zip

24 32205

Country

25 DUVAL

2a. Mailing Address

26 P.O. BOX 60653

Suite, Apt. #, etc.

27

City & State

28 JACKSONVILLE, FL.

Zip

29 32236

Country

30 DUVAL

3. Date Incorporated or Qualified

09/09/1996

3a. Date of Last Report

NONE

4. FEI Number

59-3403414

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

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

9. Name and Address of Current Registered Agent

**BAILEY, ERNESTINE
2954B PARK ST
JACKSONVILLE FL 32205**

10. Name and Address of New Registered Agent

81 Name

BAILEY, ERNESTINE

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

2954 B PARK ST

83

84 City

JACKSONVILLE

FL

85 Zip Code

32205

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

DAWN MARSH (Vice-Pres)

Dawn Marsh Ernestine Bailey Pres 4-17-97

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-electing)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **BAILEY, ERNESTINE**
STREET ADDRESS **2954B PARK ST**
CITY-ST-ZIP **JACKSONVILLE FL 32205**

TITLE **D** ☐ DELETE
NAME **MARSH, DAWN**
STREET ADDRESS **2954B PARK ST**
CITY-ST-ZIP **JACKSONVILLE FL 32205**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
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:

Dawn Marsh Ernestine Bailey Pres 4-17-97

Signature and typed or printed name of signing officer or director

Date

Daytime Phone #

904-384-8328

CR2E034 (9/96)