

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000076691

FILED
Mar 18, 2003
Secretary of State

Entity Name: TOUCHDOWN CHEM-DRY, INC.

Current Principal Place of Business:

10210 SAN JOSE BLVD
JACKSONVILLE, FL 32257 US

New Principal Place of Business:

4241 BAYMEADOWS RD. SUITE 18
JACKSONVILLE, FL 32217 US

Current Mailing Address:

1713 MONTCLAIR COVE CT
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 59-3410565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEFFIELD, J. HOWARD
4209 BAYMEADOWS RD
SUITE 4
JACKSONVILLE, FL 32217 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: DPT () Delete
Name: HOUSE, ROY F III
Address: 1713 MONTCLAIR COVE CT
City-St-Zip: JACKSONVILLE, FL 32259

Title: DVS () Delete
Name: HOUSE, PATRICIA J
Address: 1713 MONTCLAIR COVE CT
City-St-Zip: JACKSONVILLE, FL 32259

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: PATRICA J. HOUSE

DVS

03/18/2003

Electronic Signature of Signing Officer or Director

Date