

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90034 043 ***150.00

DOCUMENT # P96000081118

1. Entity Name

THE CLEANING COMPANY OF NORTH FLORIDA



Principal Place of Business

**5400-4 VERNA BLVD
 JACKSONVILLE FL 32205**

Mailing Address

**5400-4 VERNA BLVD
 JACKSONVILLE FL 32205**

2. Principal Place of Business
4579 LENOX AVE.

3. Mailing Address
4579 LENOX AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
JACKSONVILLE, FL 32205

City & State
JACKSONVILLE, FL 32205

4. FEI Number **59-3404068**

Applied For
 Not Applicable

Zip **32205** Country **DUVAL**

Zip **32205** Country **DUVAL**

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

6. Name and Address of Current Registered Agent

**LEE, DAVID B JR
 767 BLANDING BOULEVARD
 SUITE 107
 ORANGE PARK FL 32065**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
 After September 12, 2001 Fee will be \$750.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **DVP** ☐ Delete
 NAME **MANGE, JOSEPH W JR**
 STREET ADDRESS **5400 VERNA BLVD #4**
 CITY-ST-ZIP **JACKSONVILLE FL**

TITLE **SEC** ☐ Delete
 NAME **MANGE, JOANN**
 STREET ADDRESS **5400-4 VERNA BLVD**
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **4579 LENOX AVE.**
 CITY-ST-ZIP **JACKSONVILLE, FL 32205**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **4579 LENOX AVE.**
 CITY-ST-ZIP **JACKSONVILLE, FL 32205**

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 NAME
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 CITY-ST-ZIP

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment
A085308

September 6, 2001

Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Document # P96000081-1-18

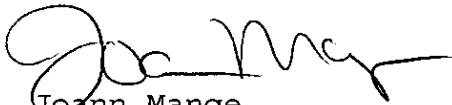
FEI # 59-3404068

The Cleaning Company of North Florida

To Whom It May Concern:

We did not previously receive the 2001 UBR. I filed the UBR's on four other companies but did not receive this one until now. Please waive our late charges.

Thank you,



Joann Mange
Secretary