


2004 FOR PROFIT CORPORATION ANNUAL REPORT

Did not receive
FILED
May 21, 2004 08:00 AM
Secretary of State
Bill Sunde
May 17, 2004

DOCUMENT # P98000009631 1. Entity Name JANITOR JUNCTION, INC.	
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Principal Place of Business 5220 W. GULF TO LAKE HWY LECANTO, FL 34461	Mailing Address 5220 W. GULF TO LAKE HWY LECANTO, FL 34461
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DO NOT WRITE IN THIS SPACE



05142004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3496659	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LARDER, WILLIAM H JR
5220 W. GULF TO LAKE HWY
LECANTO, FL 34461

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [Signature] (NOTE: Registered Agent signature required when reinstating) DATE May 17, 2004

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

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

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LARDER, LOLA A 1002 N. ROCK CRUSHER RD. CRYSTAL RIVER, FL 34429
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST LARDER, WILLIAM H JR 1002 N. ROCK CRUSHER RD. CRYSTAL RIVER, FL 34429
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05/21/04-80003-004 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 partner, officer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] DATE May 17, 2004 Daytime Phone # (352) 746-4785

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR