

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90273 030 ***150.00

DOCUMENT # P98000097782

1. Entity Name

J & B MAID SERVICE, INC.



Principal Place of Business

**11223 BOSTON AVE
WEEKI WACHEE FL 34614**

Mailing Address

**11223 BOSTON AVE
WEEKI WACHEE FL 34614**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/05)

Zip

Country

Zip

Country

4. FEI Number

59-3545374

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**KEPNER, JUDITH A
11223 BEAVERBANK STREET
BROOKSVILLE FL 34614**

*Just address
change →*

7. Name and Address of New Registered Agent

Name **JUDITH A. Kepner (Same Registered Agent)**

Street Address (P.O. Box Number is Not Acceptable)
11223 BOSTON AVE

City **Weeki Wachee**

FL

Zip Code
34614

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 **JUDITH A. Kepner PT** - *Judith A. Kepner*

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

(NOTE: Registered Agent signature required when reinstating)

4/24/2006

DATE

FILE NOW!!! FEE IS \$150.00.

After May 1, 2006 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PT** ☐ Delete
NAME **KEPNER, JUDITH A**
STREET ADDRESS **11223 BEAVERBANK ST**
CITY-ST-ZIP **BROOKSVILLE FL 34614**

TITLE **VPS** ☐ Delete
NAME **KEPNER, JUDITH ANN**
STREET ADDRESS **11223 BEAVERBANK STREET**
CITY-ST-ZIP **BROOKSVILLE FL 34614**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Address change ONLY PT** ☐ Change ☐ Addition
NAME
STREET ADDRESS **11223 BOSTON AVE**
CITY-ST-ZIP **Weeki Wachee, FL 34614**

TITLE **Address change only VPS** ☐ Change ☐ Addition
NAME
STREET ADDRESS **11223 BOSTON AVE**
CITY-ST-ZIP **Weeki Wachee, FL 34614**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **JUDITH A. Kepner** - *Judith A. Kepner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/2006

Date

352-596-4416

Daytime Phone #