## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PORATION STATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS				O3 OCT 3   AM IO: 44  SECRETARY OF STATE FALLAHASSEE, FLORIDA					
DOCUMENT # P99000049932  1. Corporation Name  Jan and Jerry Janitorial Company, Inc.														
2. Principal Office Address 5730 Bowden Road					3. Mailing Office Address Same				REIN	STA	TEM	ENT_C	)]	عياب
Suite, Apt. #, etc. 103				Suite, Apt. #, etc.				4. Date Inco	rporated or siness in Flo				7	
City & State  Jacksonville, Florida				City & State				5. FEI Number         Applied For           59-3481623         Not Applicable					1	
<sup>Zip</sup> 32216	16 USA		Zip		Country					\$8.75 Addition for a Certific	al Fee require ate of Status	c		
·					7.	Name and A	Address of C	Current Registe	ered Agent					
1	FORD, JETER, BOWLUS, DUSS 100024343881													
	Street Address (P.O. Box Number is Not Acceptable) 10110 SAN JOSE BLVD								D 10/3	1/03-	-01103	-020 **1	50.00	
:	Suite, Apt. #, Etc.											<del></del>	1	
	City JACKSONVILLE									State	Zip Code 32216		1	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.  Signature of Registered Agent Weehal Bowles V.P. Ford Telev Bowles et al Date 10/28/03  REGISTERED AGENT MUST SIGN														CR2E081 (10/02)
9. Names	and Street A	ddresses	of Each C	officer an	d/or Director (F	lorida nonpre	ofit corporation	ons must list at l	least 3 directors)					1
Titles	Titles Name of Officers and/or Directors				Street Address of E Officer and/or Dire						City	/ State / Zip		
VP.♣D	Jerry Stanley					2117 Pond Sprinig Way				Oranç	ge <u>P</u> ark, F	L 32003		
N64D	Jan Ethridge					1712 Bristlecone Pine PL				Jacksonville, FL 32225				
									<u> </u>	-				1
this reir owed b	nstatement ap by the corporal	plication, tion have	the reaso been paid	n for disa languesse	solution has bee	n eliminated duals listed (	l, the corpora on this form o	ite name satisfie to not qualify for	provided for in ches the requirement ran exemption under oath.	s of section	607.0401 or 6	317.0401, F.S., th	at all fees	
SIGNAT	TURE:		1	_					10-2	8-03				1
		GNATER	ND TYPE	DOR PE	RINTED NAME OF	SIGNING OF	FICER OR DIF	RECTOR		Date		Daytime Phone #		



5730 BOWDEN ROAD SUITE 101 JACKSONVILLE, FLORIDA 32216 (904) 425-0086 or 636-6172 Toll Free 1-800-629-2107 (Fax) (904) 636-6167

## **MEMORANDUM**

To:

Division of Corporations

From:

Jerry Stanley

Subj:

WAIVER OF PENALTY

- 1. We hereby request waiver of the penalty for corporate reinstatement. We do not recall ever receiving notification to file. We are unsure whether the application to file was mailed to our old address at 5015 Philips Highway or to our registered agent, Ford Jeter Bowlus and Duss. This is an honest oversight and the penalties are substantial. We would still be clueless to this requirement had not a potential customer brought this to our attention.
- 2. Again, we hereby request a waiver this one time and assure you to pay closer attention to this annual procedure. We have also discussed this issue with our attorney and accountant to assist us in this procedure.
- 3. Please call me at 904-759-4485 for further questions or inquiry. Your assistance in this matter and one time waiver will be greatly appreciated.

Sincerely