

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V68927** (5)

1. Corporation Name

CAN-DO CLEANERS OF PINELLAS COUNTY, INC.



Principal Place of Business

**2810 34TH ST. SO.
ST. PETERSBURG FL 33711**

Mailing Address

**2810 34TH ST. SO.
ST. PETERSBURG FL 33711**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified
10/01/1992

3a. Date of Last Report
08/04/1995

4. FCI Number

59-3147591

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SHOOK, JAMES A
2810 34TH STREET SOUTH
ST. PETERSBURG FL 33711**

81 Name **ROBERT J. HURLEY**
82 Street Address (P.O. Box Number is Not Acceptable)
4636 4th St South
83 **ST. PETERSBURG, FL**
84 City

85 Zip Code
33705

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's Board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

Typed Name of Registered Agent

[Signature]

Typed Name of Registered Agent

12. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ DELETE
NAME **MCPARLAND, DANIEL J.**
STREET ADDRESS **1417 59TH ST N**
CITY - ST - ZIP **ST. PETERSBURG FL**

TITLE **VSMD** ☒ DELETE
NAME **SHOOK, JAMES A**
STREET ADDRESS **1417 59TH ST N**
CITY - ST - ZIP **ST. PETERSBURG FL**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE **VP SEC** ☐ Change ☒ Addition
2.2 NAME **ROBERT HURLEY**
2.3 STREET ADDRESS **4636 4th St South**
2.4 CITY - ST - ZIP **ST PETERSBURG FL 33705**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

DAN MCPARLAND *[Signature]* **4/27/96** **813 867 9595**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)