**DO NOT WRITE IN THIS SPACE**

**FILE NOW!! FEE IS $150.00**
After May 1, 2008 Fee will be $550.00

**FILE NOW!! FEE IS $150.00**
After May 1, 2008 Fee will be $550.00

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1. **Entity Name**
   FLORIDA PEST CONTROL & CHEMICAL CO.

2. **Principal Place of Business**
   116 NW 16TH AVE
   PO BOX 5369
   GAINESVILLE, FL 32601

3. **Mailing Address**
   116 NW 16TH AVE
   PO BOX 5369
   GAINESVILLE, FL 32601

4. **FEI Number**
   59-6069716

5. **Certificate of Status Desired**
   [ ] $8.75 Additional Fee Required

6. **Name and Address of Current Registered Agent**
   GODSHALL, DALE L.
   116 N.W. 16TH AVE.
   GAINESVILLE, FL 32601

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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.

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9. **Election Campaign Financing Trust Fund Contribution**
   [ ] $5.00 May Be Added to Fees

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10. **OFFICERS AND DIRECTORS**

<table>
<thead>
<tr>
<th>FILE</th>
<th>NAME</th>
<th>STREET ADDRESS</th>
<th>CITY, ST-ZIP</th>
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<tr>
<td>C</td>
<td>SAPP, DEMPSY R</td>
<td>17445 SW 132 AVE</td>
<td>LAKE BUTLER, FL 32054</td>
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<tr>
<td>PD</td>
<td>SAPP, DEMPSY R JR.</td>
<td>18790 SW 132 AVE</td>
<td>LAKE BUTLER, FL 32054</td>
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<td>STD</td>
<td>SAPP, MARGIE B</td>
<td>17445 SW 132 AVE</td>
<td>LAKE BUTLER, FL 32054</td>
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<tr>
<td>D</td>
<td>JOHNSON, RANDY S</td>
<td>116 NW 16TH AVE</td>
<td>GAINESVILLE, FL 32601</td>
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<tr>
<td>VD</td>
<td>GODSHALL, DALE L</td>
<td>116 NW 16TH AVE</td>
<td>GAINESVILLE, FL 32601</td>
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<tr>
<td>VD</td>
<td>FROWICK, CHAD E</td>
<td>116 NW 16TH AVE</td>
<td>GAINESVILLE, FL 32601</td>
</tr>
</tbody>
</table>

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemenatar report is true and accurate 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:**

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**FILED**
Jan 11, 2008 08:00 A
Secretary of State