2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 205819

Entity Name: FLORIDA PEST CONTROL & CHEMICAL CO.

Current Principal Place of Business:
116 NW 16TH AVE
PO BOX 5369
GAINESVILLE, FL 32601 US

New Principal Place of Business:
116 NW 16TH AVE
GAINESVILLE, FL 32601 US

Current Mailing Address:
116 NW 16TH AVE
PO BOX 5369
GAINESVILLE, FL 32601 US

New Mailing Address:
PO BOX 5369
GAINESVILLE, FL 32627 US

FEI Number: 59-6060716 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

Name and Address of New Registered Agent:
GODSHALL, DALE L
116 N.W. 16TH AVE
GAINESVILLE, FL 32601 US

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.

SIGNATURE: DALE L. GODSHALL 01/06/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

<table>
<thead>
<tr>
<th>Title</th>
<th>C (X) Delete</th>
<th>Name</th>
<th>SAPP, DEMPSEY R.</th>
<th>Address</th>
<th>17445 SW 132 AVE</th>
<th>City-Shop</th>
<th>LAKE BUTLER, FL 32054</th>
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</thead>
<tbody>
<tr>
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<td>PD ( ) Delete</td>
<td>Name</td>
<td>SAPP, DEMPSEY R JR.</td>
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<tr>
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<td>Name</td>
<td>JOHNSON, RANDY S</td>
<td>Address</td>
<td>116 NW 18TH AVE</td>
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<tr>
<td>Title</td>
<td>VD ( ) Delete</td>
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<td>FROWICK, CHAD E</td>
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<td>City-Shop</td>
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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

<table>
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<tr>
<th>Title</th>
<th>( ) Change ( ) Addition</th>
<th>Name</th>
<th>SAPP, DEMPSEY R JR.</th>
<th>Address</th>
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<th>City-Shop</th>
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<tbody>
<tr>
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<td>Name</td>
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<td>Address</td>
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<td>City-Shop</td>
<td>GAINESVILLE, FL 32601 US</td>
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<tr>
<td>Title</td>
<td>VD ( ) Change ( ) Addition</td>
<td>Name</td>
<td>FROWICK, CHAD E</td>
<td>Address</td>
<td>116 NW 16TH AVE</td>
<td>City-Shop</td>
<td>GAINESVILLE, FL 32601 US</td>
</tr>
</tbody>
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 697, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RANDY S. JOHNSON 01/06/2009
Electronic Signature of Signing Officer or Director Date