


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 26, 2007 8:00 am**  
**Secretary of State**

03-26-2007 90054 003 \*\*\*150.00

**DOCUMENT # P03000150105**

1. Entity Name  
**DRAKE LAWN & PEST CONTROL, INC.**



Principal Place of Business 995 W. KENNEDY BLVD. STE 32 ORLANDO, FL 32810	Mailing Address 995 W. KENNEDY BLVD. STE 32 ORLANDO, FL 32810
--	--

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



03012007 Chg-P CR2E034 (12/06)

4. FEI Number  
**59-3777257**

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

<b>6. Name and Address of Current Registered Agent</b>	<b>7. Name and Address of New Registered Agent</b>
JOHNSON, WADE F JR 2901 CURRY FORD RD. SUITE 212 ORLANDO, FL 32806	Name <i>Jerry Tucker</i>
	Street Address (P.O. Box Number is Not Acceptable) <i>2700 West Hall Ln. Ste 220</i>
	City State Zip Code <i>Maitland FL 32751</i>

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 *Jerry Tucker* DATE *3-21-07*

**FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TUCKER, JERRY		NAME	
STREET ADDRESS 995 W. KENNEDY BLVD. STE. 32		STREET ADDRESS	
CITY-ST-ZIP ORLANDO, FL 32810		CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME KAPLAN, JACK		NAME	
STREET ADDRESS 995 W. KENNEDY BLVD. STE. 32		STREET ADDRESS	
CITY-ST-ZIP ORLANDO, FL 32810		CITY-ST-ZIP	
TITLE ST	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HILL, BRANDON		NAME	
STREET ADDRESS 995 W. KENNEDY BLVD. STE. 32		STREET ADDRESS	
CITY-ST-ZIP ORLANDO, FL 32810		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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 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: *Jerry Tucker* DATE: *3-21-07* DAYTIME PHONE #: *407-661-9008*