


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000083579
 1. Entity Name
AM PEST CONTROL OF MANATEE, INC.



Principal Place of Business 11610 3RD AVE. EAST BRADENTON, FL 34212-1655	Mailing Address 11610 3RD AVE. EAST BRADENTON, FL 34212-1655
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DO NOT WRITE IN THIS SPACE



06192007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-1201996	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SCHOFIELD, P. ALLEN
 1429 60TH AVE. WEST, STE. 300
 BRADENTON, FL 34207

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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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)
 Signature, typed or printed name of registered agent and title if applicable. DATE 06/26/07

U00000766599
 06/26/07-80002-003 150.00

FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DURKIN, JOHN F
STREET ADDRESS	409 PINE AVE.
CITY-ST-ZIP	ANNA MARIA, FL 34216
TITLE	D
NAME	LEWIS, JAMES M
STREET ADDRESS	614 - 36TH ST. WEST
CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 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: John F Durkin Date: 6/20/07 Daytime Phone #: (941) 778-1630

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR