

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 # **P08555** (5)

1. Corporation Name
ROLLINS, INC.



Principal Place of Business: **2170 PIEDMONT RD., N.E. ATLANTA GA 30324**
Mailing Address: **CORPORATE TAXES 2170 PIEDMONT RD. NE ATLANTA GA 30324**

3. Date Incorporated or Qualified: **12/30/1985**
3a. Date of Last Report: **04/26/1995**

2. Principal Place of Business (21) [Blank]
22. Suite, Apt. #, etc. [Blank]
23. City & State [Blank]
24. Zip [Blank] Country [Blank]

2a. Mailing Address (26) [Blank]
27. Suite, Apt. #, etc. [Blank]
28. City & State [Blank]
29. Zip [Blank] Country [Blank]

4. FEI Number: **51-0068479**
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
**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent
81. Name [Blank]
82. Street Address (P.O. Box Number is Not Acceptable) [Blank]
83. [Blank]
84. City [Blank] 85. Zip Code **FL**

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: [Blank] (NOTE: Registered Agent Signature required when reinstating) DATE: [Blank]

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, JAMES B.	1.2 NAME	
STREET ADDRESS	2170 PIEDMONT RD. NE	1.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROLLINS, GARY W.	2.2 NAME	
STREET ADDRESS	2170 PIEDMONT RD., N.E.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	2.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, GENE L.	3.2 NAME	
STREET ADDRESS	2170 PIEDMONT RD., N.E.	3.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROLLINS, JOHN W.	4.2 NAME	
STREET ADDRESS	2170 PIEDMONT RD., N.E.	4.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TIPPIE, HENRY B.	5.2 NAME	
STREET ADDRESS	2170 PIEDMONT RD., N.E.	5.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILTON, LOONEY	6.2 NAME	Looney, Wilton
STREET ADDRESS	2170 PIEDMONT RD. NE	6.3 STREET ADDRESS	
CITY-ST-ZIP	ATLANTA GA	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: *Gene L. Smith* Gene L. Smith
CFQ, Secretary & Treasurer *2/29/96* (404) 888-2064
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (12/95)

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ROLLINS, INC.
FEI #51-0068479

TITLE	NAME	WORK ADDRESS
CHAIRMAN & CHIEF EXECUTIVE OFFICER	R. Randall Rollins	2170 Piedmont Road, NE Atlanta, GA 30324

DIRECTORS		
	R. Randall Rollins	2170 Piedmont Road, NE Atlanta, GA 30324
	Bill J. Dismuke	2170 Piedmont Road, NE Atlanta, GA 30324

In addition to the Officer and Directors listing in Item 12, The above three should be on file. Rollins, Inc. has a total of seven Directors with two of them holding offices in the Company, Gary W. Rollins & R. Randall Rollins.