

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000000603

FILED
Jan 11, 2005
Secretary of State

Entity Name: INTEGRITY PEST CONTROL, INC.

Current Principal Place of Business:

119 NORTHWEST GFREGORY AVENUE
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

119 NORTHWEST GREGORY AVENUE
FORT WALTON BEACH, FL 32548

Current Mailing Address:

119 NORTHWEST GFREGORY AVENUE
FORT WALTON BEACH, FL 32548

New Mailing Address:

119 NORTHWEST GREGORY AVENUE
FORT WALTON BEACH, FL 32548

FEI Number: 59-3551106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: SPAFFORD, DEAN C
Address: 119 NORTHWEST GFREGORY AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VP () Delete
Name: WILLAMS, TRONE
Address: 8204 PAMPLOMAST
City-St-Zip: GULF BREEZE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SPAFFORD, DEAN C
Address: 119 NORTHWEST GREGORY AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: VP (X) Change () Addition
Name: SPAFFORD, JUDDITH A
Address: 119 NW. GREGORY AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32548

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEAN C. SPAFFORD

PRES

01/11/2005

Electronic Signature of Signing Officer or Director

Date