2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000044445

1. Entity Name
   BRIAN'S PERSONALIZED PEST CONTROL AND LAWN CARE,

2. Principal Place of Business
   950 ALBRITTON WAY
   LAKE WALES FL 33893

3. Mailing Address
   950 ALBRITTON WAY
   LAKE WALES FL 33859-1304

4. FEI Number
   59-3587682

5. Certificate of Status Desired
   $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
   VANBLARGAN, BRIAN J
   950 ALBRITTON WAY
   LAKE WALES FL 33893

7. Name and Address of New Registered Agent
   Name
   Street Address (P.O. Box Number is Not Acceptable)
   City
   Zip Code
   FL

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.

SIGNATURE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing
    Trust Fund Contribution.

11. OFFICERS AND DIRECTORS
    | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
    |-------|------|----------------|-------------|
    | D     | VANBLARGAN, BRIAN J | 950 ALBRITTON WAY | LAKE WALES FL 33853 |
    | D     | VANBLARGAN, CLARA R | 950 ALBRITTON WAY | LAKE WALES FL 33853 |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
    | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
    |-------|------|----------------|-------------|
    | D, P  |      |                |             |
    | D, V, T, S | |              |             |

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 

DATE: 04-02-00

Clerk: J. Simons
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