

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 16, 2001 8:00 am
Secretary of State

04-16-2001 90251 043 ***150.00

0358101

DOCUMENT # P96000036542

1. Entity Name

RANGER TERMITE & PEST CONTROL INC.

Principal Place of Business

1920 9TH ST N
STE D
SAINT PETERSBURG FL 33704

Mailing Address

1920 9TH ST N
STE D
SAINT PETERSBURG FL 33704

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0660037

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DONALDSON, BRUCE L
3915 17TH STREET, NORTH
ST. PETERSBURG FL 33714

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S ☒ Delete
NAME DONALDSON, SYLVIA
STREET ADDRESS 11601 4TH ST N APT 3105
CITY-ST-ZIP SAINT PETERSBURG FL 33716

TITLE S ☐ Change ☒ Addition
NAME Heather Curtis
STREET ADDRESS 3915 17 st. N
CITY-ST-ZIP st. Pete Fl. 33714

TITLE O ☒ Delete
NAME DONALDSON, BRUCE
STREET ADDRESS 3915 17 ST N
CITY-ST-ZIP ST PETE FL

TITLE O ☐ Change ☐ Addition
NAME Bruce Donaldson
STREET ADDRESS 11601 4 st. N. Apt 5105
CITY-ST-ZIP st. Pete Fl. 33716

TITLE VP ☒ Delete
NAME DONALDSON, PATRICK
STREET ADDRESS 11601 4TH ST N APT 3105
CITY-ST-ZIP SAINT PETERSBURG FL 33716

TITLE VP ☐ Change ☐ Addition
NAME Patrick Donaldson
STREET ADDRESS 11601 4st. N. Apt. 5105
CITY-ST-ZIP st. Pete. Fl. 33716

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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:

Bruce L. Donaldson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-25-01

Date

727-527-9032

Daytime Phone #

CR2E034 (10/00)