2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000093176

Title:

Name:

Address: City-St-Zip: () Delete

LISENKO, DANIEL W

NOKOMIS, FL 34275

403 POINCIANA RD

FILED Nov 15, 2006 Secretary of State

Entity Name: NORRIS EXTERMINATING, INC. **Current Principal Place of Business: New Principal Place of Business:** 7233 SPENCER PARRISH RD. PARRISH, FL 34219 **Current Mailing Address: New Mailing Address:** 7233 SPENCER PARRISH RD. PARRISH, FL 34219 FEI Number: 20-0181648 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NORRIS, JEFFREY W 7233 SPENCER PARRISH RD. PARRISH, FL 34219 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: CHRISTINE NORRIS Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition NORRIS, JEFFREY W NORRIS, JEFFREY W Name: Name: 2005 42ND ST W 7233 SPENCER PARRISH RD Address: Address: PARRISH, FL 34219 City-St-Zip: BRADENTON, FL 34205 City-St-Zip: Title: Title: (X) Change () Addition () Delete NORRIS, CHRISTINE M Name: Name: NORRIS. CHRISTINE M 2005 42ND ST W 7233 SPENCER PARRISH RD Address: Address: BRADENTON, FL 34205 PARRISH, FL 34219 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JEFFREY W. NORRIS PRES 11/15/2006

() Change () Addition