

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 837496

FILED
Jan 24, 2007
Secretary of State

Entity Name: DOTHAN AWNING COMPANY, INC.

Current Principal Place of Business:

106 E FRANKLIN ST
P.O. BOX 1563
DOTHAN, AL 36302

New Principal Place of Business:

106 E FRANKLIN ST
DOTHAN, AL 36302

Current Mailing Address:

106 E FRANKLIN ST
P.O. BOX 1563
DOTHAN, AL 36302

New Mailing Address:

FEI Number: 63-0631391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TERMINIX SERVICES, INC.
208 NORTH JEFFERSON ST.
MARIANNA, FL 32446 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: D () Delete
Name: THOMAS, HELEN L.,
Address: 405 CONNELLY ST.
City-St-Zip: DOTHAN AL,

Title: PD () Delete
Name: THOMAS, PATRICK A.,
Address: 12 WOODMERE DR
City-St-Zip: DOTHAN, AL 36305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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.

SIGNATURE: PATRICK A. THOMAS

PRES

01/24/2007

Electronic Signature of Signing Officer or Director

Date