

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714998

FILED
Jan 29, 2020
Secretary of State
4062682952CC

Entity Name: FLORIDA PEST MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

9005 E MARTIN LUTHER KING DRIVE
SUITE 240
TARPON SPRINGS, FL 34698

Current Mailing Address:

PO BOX 0294
GOLDENROD, FL 32733-0294 US

FEI Number: 59-0839828

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

OSS OFFICE SUPPORT SERVICES, INC.
2789 WRIGHTS ROAD
SUITE 1021
OVIEDO, FL 32765 US

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: KEVIN CHINFATT

01/29/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title IMMEDIATE PAST PRESIDENT
Name HOFFER, ERIC
Address 12329 NW 35 STREET
City-State-Zip: CORAL SPRINGS FL 33065

Title PRESIDENT ELECT
Name VARONA, KYLE
Address PO BOX 4093
City-State-Zip: SARASOTA FL 34230

Title PRESIDENT
Name GRAHAM, SUZANNE
Address 9005 E MARTIN LUTHER KING DRIVE
SUITE 240
City-State-Zip: TARPON SPRINGS FL 34698

Title VP
Name DAVID, COOKSEY
Address 2861 COLLEGE STREET
City-State-Zip: JACKSONVILLE FL 32205

Title TREASURER
Name CHRIS, CAVANAGH
Address 737 SW 9TH TERR
City-State-Zip: POMPANO BEACH FL 33069

Title SECRETARY
Name JEREMY, MANEOL
Address 9005 E MARTIN LUTHER KING DRIVE
SUITE 240
City-State-Zip: TARPON SPRINGS FL 34698

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUZANNE GRAHAM

PRESIDENT

01/29/2020

Electronic Signature of Signing Officer/Director Detail

Date