### 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 714998** 

Entity Name: FLORIDA PEST MANAGEMENT ASSOCIATION, INC.

FILED
Mar 21, 2013
Secretary of State
CC8213246845

# **Current Principal Place of Business:**

6150 METROWEST BOULEVARD SUITE 302 ORLANDO, FL 32835

# **Current Mailing Address:**

6150 METROWEST BOULEVARD SUITE 302 ORLANDO, FL 32835

FEI Number: 59-0839828 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

FUGLER, ALLEN M 6150 METROWEST BOULEVARD SUITRE ORLANDO, FL 32810 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

| Title   | PRESIDENT       | Title   | PRESIDENT-ELECT |
|---------|-----------------|---------|-----------------|
| Name    | COOKSEY, JOHN   | Name    | RILEY, BILLY    |
| Address | 2861 COLLEGE ST | Address | 604 ELM ST      |

City-State-Zip: JACKSONVILLE FL 32205 City-State-Zip: NICEVILLE FL 32578

Title VP Title TREASURER

Name RUEBELING, KEITH Name JONES, ADAM W

Address PO BOX 1253 Address 315 GROVELAND STREET

City-State-Zip: LEHIGH ACRES FL 33970 City-State-Zip: ORLANDO FL 32804

Title PAST PRESIDENT Title SECRETARY

Name BRAKER, GEORGE Name ANNE MARIE, TULP

Address 2200 NW BOCA RATON BLVD STE 111 Address 615 NW MERCANTILE PLACE City-State-Zip: BOCA RAON FL 33431 City-State-Zip: PORT ST LUCIE FL 34986

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: JOHN COOKSEY

PRESIDENT

03/21/2013