

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001966

Entity Name: CERTIFIED PEST CONTROL OPERATORS OF FLORIDA, INC.**FILED**
Mar 19, 2021
Secretary of State
8885302205CC**Current Principal Place of Business:**6635 W COMMERCIAL BLVD
SUITE 201
TAMARAC, FL 33319**Current Mailing Address:**6635 W COMMERCIAL BLVD
SUITE 201
TAMARAC, FL 33319**FEI Number:** 65-0572961**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKERS, MICHAEL
6635 W COMMERCIAL BLVD
SUITE 201
TAMARAC, FL 33319 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:** MICHAEL BECKERS

03/19/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	SKLAROFF, WILLIAM
Address	6635 W COMMERCIAL BLVD SUITE 201
City-State-Zip:	TAMARAC FL 33319
Title	ED
Name	BECKERS, MICHAEL
Address	6635 W COMMERCIAL BLVD #201
City-State-Zip:	TAMARAC FL 33319

Title	PRESIDENT
Name	BARTLEY, JAMES
Address	186 BENT ARROW SUITE 201
City-State-Zip:	JUPITER, FL 33458
Title	GENERAL MANAGER
Name	USHA, TERRI
Address	6635 W COMMERCIAL BLVD SUITE 201
City-State-Zip:	TAMARAC FL 33319

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: TERRI USHA

GENERAL MANAGER

03/19/2021

Electronic Signature of Signing Officer/Director Detail

Date