

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001966

Entity Name: CERTIFIED PEST CONTROL OPERATORS OF FLORIDA, INC.

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:

WEINBERG, STEVEN AESQ.
8000 PETERS ROAD
PLANTATION, FL 33324 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 SECRETARY
Name BARTLEY, JIM
Address 186 BENT ARROW
City-State-Zip: JUPITER FL 33458

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

Title PRESIDENT
Name JONOVICH, JOE
Address 6635 W COMMERCIAL BLVD
SUITE 201
City-State-Zip: TAMARAC FL 33319

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

04/22/2016

Electronic Signature of Signing Officer/Director Detail

Date