

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 422344

**Entity Name:** AARON PEST CONTROL, INC.

**Current Principal Place of Business:**

3200 N WOODLAND BLVD  
DELAND, FL 32720

**Current Mailing Address:**

3200 N WOODLAND BLVD  
DELAND, FL 32720 US

**FEI Number:** 59-1452379

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SMITH, FRANCIS J  
1441 GRAND AVE.  
DELAND, FL 32720 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 C  
Name SMITH, FRANCIS J  
Address 1441 GRAND AVE  
City-State-Zip: DELAND FL 32720

Title ST  
Name SMITH, LAVERNE  
Address 1441 GRAND AVE  
City-State-Zip: DELAND FL 32720

Title P  
Name SMITH, PHILLIP J  
Address 4001 HWY 11  
City-State-Zip: DELAND FL 32720

Title VP  
Name JOHNSON, CYNTHIA S  
Address 704 ALBA DR.  
City-State-Zip: ORLANDO FL 32804

Title D  
Name GINES, MARIO K  
Address 101 LEON AVE  
City-State-Zip: DELAND FL 32720

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

**SIGNATURE:** MARIO GINES

**DIRECTOR**

**01/16/2014**

Electronic Signature of Signing Officer/Director Detail

Date