

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G94354

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

**Current Principal Place of Business:**

6251 THOMAS ROAD  
FT. MYERS, FL 33912

**FILED**  
**Apr 09, 2014**  
**Secretary of State**  
**CC9152489709**

**Current Mailing Address:**

6251 THOMAS ROAD  
FT. MYERS, FL 33912 US

**FEI Number: 59-2397868**

**Certificate of Status Desired: No**

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

PAUL, MARK A.  
6251 THOMAS ROAD  
FORT MYERS, FL 33912 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 DPST  
Name PAUL, MARK A.  
Address 6251 THOMAS ROAD  
City-State-Zip: FORT MYERS FL 33912

Title T  
Name PAUL, MARK A.  
Address 6251 THOMAS ROAD  
City-State-Zip: FT MYERS FL 33912

*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: MARK A PAUL, SR.**

**SECRETARY**

**04/09/2014**

Electronic Signature of Signing Officer/Director Detail

Date