

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000075978

**Entity Name:** NATIVE SUN PEST CONTROL, INC.

**Current Principal Place of Business:**

5790 YAHL ST.  
STE. 102  
NAPLES, FL 34109

**FILED**  
**Mar 10, 2015**  
**Secretary of State**  
**CC0133926596**

**Current Mailing Address:**

5790 YAHL ST.  
STE. 102  
NAPLES, FL 34109 US

**FEI Number:** 27-3254953

**Certificate of Status Desired:** No

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

TOLLETT, KELLY  
5790 YAHL ST.  
STE. 102  
NAPLES, FL 34109 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            DP  
Name            TOLLETT, LARRY JR.  
Address        5790 YAHL ST.  
                  STE. 102  
City-State-Zip: NAPLES FL 34109

Title            DVPTS  
Name            TOLLETT, KELLY  
Address        5790 YAHL ST.  
                  STE. 102  
City-State-Zip: NAPLES FL 34109

*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:** LARRY TOLLETT, JR.

**PRESIDENT**

**03/10/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date