

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000043371

Entity Name: EASTERN EXTERMINATING, INC.

Current Principal Place of Business:

953 NW 3RD AVE, SUITE 11
FLORIDA CITY, FL 33034

Current Mailing Address:

953 NW 3RD AVE, SUITE 11
FLORIDA CITY, FL 33034 US

FEI Number: 65-0494903

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PORTER, LORI A
953 NW 3RD AVE, SUITE 11
FLORIDA CITY, FL 33034 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 PORTER, LORI A
Address 953 NW 3RD AVE, SUITE 11
City-State-Zip: FLORIDA CITY FL 33034

Title DSVP
Name PORTER, POWELL
Address 953 NW 3RD AVE, SUITE 11
City-State-Zip: FLORIDA CITY FL 33034

Title D
Name STOREY, JUSTIN C
Address 953 NW 3RD AVE, SUITE 11
City-State-Zip: FLORIDA CITY FL 33034

Title T
Name STOREY, MARIA L
Address 953 NW 3RD AVE, SUITE 11
City-State-Zip: FLORIDA CITY FL 33034

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: LORI PORTER

DP

04/29/2014

Electronic Signature of Signing Officer/Director Detail

Date