

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000078219

**Entity Name:** 1ST CHOICE PEST SERVICES, LLC

**Current Principal Place of Business:**

1285 SUMERLIN DR  
TALLAHASSEE, FL 32317

**Current Mailing Address:**

1285 SUMERLIN DR  
TALLAHASSEE, FL 32317 US

**FEI Number:** 41-2247555

**Certificate of Status Desired:** No

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

PESCHL, BRIAN D  
1285 SUMELIN DR  
TALLAHASSEE, FL 32317 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

**Authorized Person(s) Detail :**

Title PRES  
Name PESCHL, BRIAN D  
Address 1285 SUMERLIN DR  
City-State-Zip: TALLAHASSEE FL 32317

Title VP  
Name PESCHL, SUZANNE L  
Address 1285 SUMERLIN DR  
City-State-Zip: TALLAHASSEE FL 32317

Title MGR  
Name JONES, LEONARD G  
Address 5656 AENON LN LOT #15  
City-State-Zip: TALLAHASSEE FL 32310

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRIAN PESCHL

**OWNER**

**02/28/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date