

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000093846

**Entity Name:** ACCURATE PEST MANAGEMENT LLC

**Current Principal Place of Business:**

1230 LOWELL TERRACE  
INVERNESS, FL 34452

**Current Mailing Address:**

P O BOX 238  
INVERNESS, FL 34451

**FEI Number:** 47-1089283

**Certificate of Status Desired:** No

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

WILLIAMS, EDWARD E  
1230 LOWELL TERRACE  
INVERNESS, FL 34452 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:** EDWARD WILLIAMS

02/23/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name WILLIAMS, EDWARD E  
Address 1230 LOWELL TERRACE  
City-State-Zip: INVERNESS FL 34452

Title SECRETARY  
Name WILLIAMS, TIFFANY  
Address 1230 LOWELL TERRACE  
City-State-Zip: INVERNESS FL 34452

*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:** EDWARD WILLIAMS

OWNER

02/23/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date