

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000256870

Entity Name: COMPLETE PEST MANAGEMENT, LLC

Current Principal Place of Business:

2462 W SR 426
STE 1030
OVEIDO, FL 32765

Current Mailing Address:

PO BOX 1267
GOLDENROD, FL 32733 US

FEI Number: 83-2448079

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPONI, ELSO R JR
2462 W SR 426
STE 1030
OVEIDO, FL 32765 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 SEC
Name TAYLOR, WILLIAM KEITH
Address 2462 W SR 426
STE 1030
City-State-Zip: OVEIDO FL 32765

Title VP
Name CAPONI, PAMELA M
Address 2462 W SR 426
STE 1030
City-State-Zip: OVEIDO FL 32765

Title MGR, P
Name CAPONI, ELSO R JR.
Address 2462 W SR 426
STE 1030
City-State-Zip: OVEIDO FL 32765

Title T
Name ZDRODOWSKI, DAVID P
Address 2462 W SR 426
STE 1030
City-State-Zip: OVEIDO FL 32765

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: ELSO CAPONI

PRESIDENT

03/13/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date