

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 855574

**Entity Name:** CLARKE ENVIRONMENTAL MOSQUITO MANAGEMENT, INC.

**FILED**  
**Jan 08, 2019**  
**Secretary of State**  
**9282829956CC**

**Current Principal Place of Business:**

675 SIDWELL COURT  
SAINT CHARLES, IL 60174

**Current Mailing Address:**

675 SIDWELL COURT  
SAINT CHARLES, IL 60174 US

**FEI Number: 36-2391274**

**Certificate of Status Desired: No**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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 TREA  
Name WOOD, CLARK  
Address 159 N. GARDEN AVE.  
City-State-Zip: ROSELLE IL 60172

Title SEC  
Name TECSON, ANDREW P  
Address 30 S. WACKER DRIVE, SUITE 2600  
City-State-Zip: CHICAGO IL 60606

Title DIR  
Name CLARKE, MARY K  
Address 159 N. GARDEN AVE.  
City-State-Zip: ROSELLE IL 60172

Title PRES  
Name CLARKE, JOHN L III  
Address 159 N. GARDEN AVE.  
City-State-Zip: ROSELLE IL 60172

Title VP  
Name FRUENDT, JOEL  
Address 159 N. GARDEN AVE.  
City-State-Zip: ROSELLE IL 60172

Title VP- HUMAN RESOURCES  
Name REITER, JULIE  
Address 159 N. GARDEN AVE.  
City-State-Zip: ROSELLE IL 60172

*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: JOHN L CLARKE III**

**PRES**

**01/08/2019**

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

\_\_\_\_\_  
Date