

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04761

Entity Name: TRULY NOLEN EXTERMINATING, INC.**Current Principal Place of Business:**432 S. WILLIAMS BLVD.
TUCSON, AZ 85711**Current Mailing Address:**432 S. WILLIAMS BLVD.
TUCSON, AZ 85711 US**FEI Number: 86-0169166****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH 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 S
Name SENNER, MICHELLE
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711Title PD
Name NOLEN, STEVEN SPD
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711Title VP
Name BELLET, JUSTIN VP
Address 525 WILBUR ST.
City-State-Zip: BRANDON FL 33511Title VP
Name COHEN, DARLENE
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711Title VP
Name MAHER, CHRIS
Address 770 TAMiami TRAIL
City-State-Zip: PORTCHARLOTTE FL 33953Title VTD
Name HARTLEY, ROBERT W
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711Title VP
Name DESEAR, RON
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711Title VP
Name WEATHERLY, GREG
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711

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: STEVEN NOLEN**PRESIDENT****02/07/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date