FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DO 1. Co

(2)

FILED Jan 28 1997 8:00am Secretary of State

CUMENT poration Name	#	480937	

HATLEY PEST CONTROL, INC.

									A PARAL BARAL	A1811 IA81	
Principal Place of Business Mailing Address							ı taarır sısat isrin dhild ibidd littl (88)	DIGIT WIGHT BERL	1 81811 81811 1	918H 1881	
	DILLARD STREET IDEN FL 34787	534 SOUTH DILLARD STREET WINTER GARDEN FL 34787-3529									
							3. Date Incorporated or Qualified 07/22/1975		of Last R	eport	
2. Principal	Prace of Business	2a. Mailin	g Address				4. FEI Number		1AT	oplied For	
21 26							59-1606908 Not Applicable				
Suite, Apt #, etc Suite, Apt. #, etc. 22 27 City & State City & State				*****			5. Certificate of Status Desired		\$8.75		
							Fee Required				
23	aic	28	State				6. Election Campaign Financing		\$5.00		
Zip	Country	Zip		Cour	ntrv		Trust Fund Contribution	-4	Added		
24	25	29		30	,		8. This corporation has liability for Florida Statutes	ntangible ta Yes []		. 199.032,	
	9. Name and Address of Curre		gent	100			10. Name and Address of New Re	pistered Ag	jent		
	TLEY, JAMES R.			,	81	Name					
	4 South dillard street				82	Street Addre	ess (P.O. Box Number is Not Acceptat	اعا			
Wi	NTER GARDEN FL 34787					011001710014		,			
				[+	83						
					84	City			85 Zip (Code	
'44 A						•			,		
office or agent 1	it to the provisions of Sections 607.05 r regislered agent, or both, in the Sta am familiar with, and accept the obti	te of Florida. Suc gations of, Section	s, Florida Statu h change was n 607.0505, Fl	ites, the ab authorized lorida Statu	ove by ites	-named corporation	oration submits this statement for the poor's board of directors. I hereby accept			s registered registered	
SIGNATURE	Signaturi, typed or proced har a phregistated a	·· · •···						12.0			
12.		gool and title if applicat ND DIRECTORS	ole (NO	TE: Reg stered	Age	nt signature require	id when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE EDC AND E	VIDEOTOE	O IN 10	
TILE	P	ND DIRECTORS	DELETE	1.1 7071	F	1	ADDITIONS/CHANGES TO OFFIC		Change	Addition	
NAME	HATLEY,WANDA L.			1.2 NAM		j		H	_ O.nz.igo		
STREET ADDRESS	9644 WOODMONT PLACE					ADDRESS					
CITY - ST - ZIP	WINDERMERE FL 34786	1		14 CIT		· · · · · · · · · · · · · · · · · · ·					
TiTLE	M		DELETE	21 TITL	******	-			Change	Addition	
NAME	HATLEY,GARY L.			22 NA	AE.						
STREET ADDRESS				2.3 STR	EET	ADDRESS					
City -ST-7IP	WINTER GARDEN FL 3478	5.4		2. 4 CIT	Y-\$	T-ZIP					
T TEF	S HATLEY BUIDDO CANDOA K		DELETE	3.1 TITL	.E		:	1. 1	Change	Addition	
NAME	HATLEY-PHIPPS, SANDRA K. 2649 WINDSOR HILL DRIVE			3 2 NAA							
STREET ADDRESS	WINDERMERE FL 34786					ADDRESS					
CITY -ST-ZIP	**************************************		DELETE	3.4. CIT		T-ZIP			Channa	- Addition	
NAME			had DELLIE	4.1 TITL 4. 2 NA				L	.J Change	☐ Addition	
STREET ADORESS						ADDDECC					
CITY-ST ZIP				4.4 CITY		ADDRESS					
TITLE			DELETE	5.1 TiTL					Change	Addition	
NAME				5.2 NAN				_			
STREET ADORESS	5					ADDRESS					
CITY - STZIP				5.4 CITY	/-ST	- ZIP					
TITLE			DELETE	6.1 TITL					Change	Addition	
NAME				6.2 NAN	AE.						
STREET ADDRESS	s			6.3 STR	EET /	ADDRESS					

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 3 if changed, or on an attachment with an address.

6.4 CfTY-ST-ZiP

SIGNATURE:

CITT - ST-ZIP

1-17-97