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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Mar 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 499259

(0)

NEMATODE CONTROLLERS, INC.										
Principal Place	e of Business	Mailing Address	Mailing Address				EI EILIS IEIL	Billin Albsi A	181) MINTERSO	01011 (#01
417 E. LUMSDEN ROAD P.O. BOX 341 P.O. BOX 341										
P.O. BOX 341 P.O. BOX 341 BRANDON FL 33511 BRANDON FL 33511-6443										
						3. Date Incorporated or C 03/18/1976	lualified		te of Last R 25/1996	eport
21	lace of Husiness	28. Mailing Address	26			4. FEI Number 59-1652306	···	Applied For Not Applicable		
Surie, Apt. 22	#, etc	Suite, Apt. #, etc.	27			5. Certificate of Status De	sired		\$8.75 / Fee Re	
City & State	e	City & State				Election Campaign Fine Trust Fund Contribution	-		\$5.00 Added 1	
Zip 24	Country 25				<i>'</i>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes K No				
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address o	New Res	istered A	lgent	
CO	OK, MICHAEL ALLEN			81	Name					
	E. LUMSDEN ROAD INDON FL 33511		82 Street Addr			ess (P.O. Box Number is Not	Acceptabl	le)		
Div	44001112 00011			83		1				
				84				FL	'.	Code
11. Pursuant office or ragent La	to the provisions of Sections 607.050 egistered agent, or both, in the State m farmhar with, and accept the oblig	02 and 607.1508, Florida Statu e of Florida. Such change was lations of, Section 607.0505, Fl	tes, the a authorize orida Sta	bove d by tutes	e-named corp the corpora s.	oration submits this statemen ion's board of directors. I here	for the pu by accept	urpose of t the appo	changing it sintment as	s registered registered
SIGNATURE	Signature typed or printed name of registered ag	rue to distribut manifesting	TE Donistava	- A		ed when reinstating)		DATE		
12.	· · · · · · · · · · · · · · · · · · ·	ID DIRECTORS	13.	O NOE	en agranie radu	ADDITIONS/CHANGES	TO OFFIC		DIRECTOR	S IN 12
TITLE	PD	☐ DELETE	1.1 T	ITLE					Change	Addition
NAME	COOK, MICHAEL ALLAN		1.2 N	AME						
STREET ADDRESS	417 E. LUMSDEN RD.		1.3 \$		ADDRESS					
City - St - ZiP	BRANDON FL	☐ DEL€TE	1.4 CITY - ST - ZIP 2.1 TITLE		ST-ZIP				T C.	Addition
TOLE	ST COOK DEE ANN	☐ btteit	2.1 IIILE 2.2 NAME						Change	LI Addition
NAME STREET ADDRESS	COOK, DEE ANN 417 E. LUMSDEN RD.				ADORESS					
CHY-SI-ZIP	BRANDON FL				ST-ZIP					
TITLE		☐ DELETE	31 TITL		<u> </u>	**************************************			Change	Addition
NAME			32 N	AME						
STREET ADDRESS			33\$	TAEET	ADDRESS					
CITY-S1-ZIP					ST-ZIP					
TITLE		L_J DELETE	4.1 1						Change	☐ Addition
NAME Protect approach				VAME TOPOT						
STREET ADDRESS CITY-ST-ZIP					T ADDRESS ST-ZIP					
TITLE		☐ DELETE	5.1 T		21-511				Change	Addition
NAME			5.2 N	AME						
STREET ADDRESS			5.3 \$	TREET	ADDRESS					
CITY+S1-7iP			540	ITY-S	ST-ZIP					
Title		DELETE	617	ITLE					Change	Addition
NAME			6.2 N		1					
STREET ADDRESS	88		6.3 STREET ADDRESS							ļ
CITY-S1-ZiP	by certify that the information supplie	nd with this bind dose not avail			T-ZIP	Lin Section 119 07/21/01 Floris	a Statutor	further	Certify that	the
informatio	by certily that are incommation supplies indicated on this annual report or flicer or director of the corporation on Block 12 or Block 13 if changed, or Block 13 if changed, or Block 14 if changed, or Block 14 if changed, or Block 15 if changed,	supplemental annual report is the receiver of trustee empor	true and vered to	acci	ivale and the	my signature shall have the s	ama legal	Leffect as	if made un	der oath: that l

DEE ANN COOK