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

Apr 20 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 531065 ENVIRONMENTAL PESTCONTROL ASSOCIATION OF FLORIDA Mailing Address Principal Place of Business 1031 S. ST. RD. 21 1031 S. ST. RD. 21 P.O. BOX 124 ORANGE SPRINGS FL 32182 P.O. BOX 124 ORANGE SPRINGS FL 32182 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/07/1977 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 277 STAR LAKE DRIVE SAME 59-1735124 Not Applicable 26 Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be TAWTHORNE FL. \Box Trust Fund Contribution Added to Fees 28 Country 8. This corporation owes or has paid the current year Intangible Yes □ Ňo 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent FOSTER, LAWRENCE R. JR. FOSTER, LAWRENCER 1045 S. ST. RD. 21 Street Address (P.O. Box Number is Not Acceptable) **ORANGE SPRINGS FL 32682** 32640 HAWTHORNE 11. Pursuant to the provisions of Sociions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Soction 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 THUE 71TLF FOSTER, LAWRENCE JR. 1.2 NAME NAME 277 STAR LAKE DR. 1045 S. ST. RD. 21 1.3 STREET ADDRESS STREET ADDRESS HAWTHORNE, FL. 32640 ORANGE SPRINGS FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 21 TITLE Change Addition TITLE FOSTER, BARBARA F. NAME 2 2 NAME 277 STAR LAKE DR. 1045 S. ST. RD. 21 STREET ADDRESS 2.3 STREET ADDRESS ORANGE SPRINGS FL HAWTHORNE, FL. CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STHEET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 41 TITLE Change Addition NAME 4. 2 NAM8 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - 7IP Addition DELETE Change 5.1 TITLE TIFLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS

FILED

Change

Addition

14. I 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 suppliemental 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 13 if changed, or on an attachment with an address. BARBARA, B. FOSTCE

SIGNATURE:

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

61 TITLE

6.2 NAME

DELETE

CITY-ST-ZIP

STREET ADDRESS

NAME