2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2008 8:00 am
Secretary of State
02-28-2008 90014 040 ***150.00

DOCUMENT # 532386

1. Entity Name
CRITTER-GITTER PEST CONTROL, INC.

Principal Place of Business	Mailing Address
7050 W. FAIRFIELD DR. PENSACOLA FL 32506	7050 W. FAIRFIELD DR. PENSACOLA FL 32506

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

1st MOORE CR2E034 (10/07)

4. FEI Number 59-1746265 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STOREY, RICHARD K
7050 FAIRFIELD DRIVE
PENSACOLA FL 32506

7. Name and Address of New Registered Agent

Name: Diane E. Storey
Street Address (P.O. Box Number is Not Acceptable): 3243 Bold Ruler Dr.
City: Cantonment FL Zip Code: 32533

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Diane P. Storey — DATE: 2-13-08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: SD NAME: STOREY, DIANE E STREET ADDRESS: 3243 Bold Ruler Dr. CITY-ST-ZIP: Cantonment, FL 32533	☐ Delete	TITLE: PD NAME: Storey, Diane E STREET ADDRESS: 3243 Bold Ruler Dr. CITY-ST-ZIP: Cantonment, FL 32533	☐ Change ☒ Addition
TITLE: PD NAME: STOREY, RICHARD K STREET ADDRESS: 7050 FAIRFIELD DRIVE CITY-ST-ZIP: PENSACOLA, FL 00000	☒ Delete	TITLE: VPD NAME: Eric Storey STREET ADDRESS: 6337 Belle Grove Dr. CITY-ST-ZIP: Baton Rouge, LA 70820	☐ Change ☒ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Diane P. Storey — 2-13-08 — 850-455-6500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #