

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 552357

FILED
Feb 23, 2009
Secretary of State

Entity Name: MIDDLETON PEST CONTROL, INC.

Current Principal Place of Business:

1736 33RD STREET
ORLANDO, FL 32839 US

New Principal Place of Business:

Current Mailing Address:

1736 33RD STREET
ORLANDO, FL 32839 US

New Mailing Address:

FEI Number: 59-1792752 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARRIERO, EDWARD M
595 SOUTH FEDERAL HIGHWAY
SUITE 500
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HAYES, JOHN J
Address: 1736 33RD STREET
City-St-Zip: ORLANDO, FL 32839

Title: P () Delete
Name: STEINMETZ, CHARLES
Address: 1736 33RD STREET
City-St-Zip: ORLANDO, FL 32839

Title: T () Delete
Name: CARRIERO, EDWARD M
Address: 595 SOUTH FEDERAL HIGHWAY #500
City-St-Zip: BOCA RATON, FL 33432

Title: T () Delete
Name: PRESTIPINO, FRANK C
Address: 1736 33RD STREET
City-St-Zip: ORLANDO, FL 32839

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RUFF, JACK I
Address: 1736 33RD STREET
City-St-Zip: ORLANDO, FL 32839

Title: VP (X) Change () Addition
Name: BUHLER, JEFFREY
Address: 1736 33RD STREET
City-St-Zip: ORLANDO, FL 32839

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PVP () Change (X) Addition
Name: STEINMETZ, CHARLES P
Address: 1736 33RD STREET
City-St-Zip: ORLANDO, FL 32839

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: FRANK C PRESTIPINO

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02/23/2009

Electronic Signature of Signing Officer or Director

_____ Date