

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2005 08:00 AM
Secretary of State

DOCUMENT # 610794

1. Entity Name
CENTRAL FLORIDA PEST CONTROL, INC.



Principal Place of Business
**3708 W. INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BCH, FL 32124-1030 US**

Mailing Address
**3708 W. INTERNATIONAL SPEEDWAY BLVD.
DAYTONA BCH, FL 32124-1030 US**



01122005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1889765

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DEGLER, GEORGE
891 HEWITT DRIVE
PORT ORANGE, FL 32127**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

000000190384
01/24/05-80131-022 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	DEGLER, GEORGE W.
STREET ADDRESS	891 HEWITT DRIVE
CITY-ST-ZIP	PORT ORANGE, FL 32127
TITLE	SD
NAME	DEGLER, JUDITH P
STREET ADDRESS	891 HEWITT DRIVE
CITY-ST-ZIP	PORT ORANGE, FL 32127
TITLE	VD
NAME	DEGLER, GREGORY W.
STREET ADDRESS	3448 COUNTRY WALK LN
CITY-ST-ZIP	PORT ORANGE, FL 32119
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. 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 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: *George W. Degler* 1/24/05 308-252-4697
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #