

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 619589

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** ABSOLUTE TERMITE AND PEST CONTROL OF ST. PETERSBURG, INC.

**Current Principal Place of Business:**

13120 4TH. STR. E.  
MADEIRA BEACH, FL 33708 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 86037  
MADEIRA BEACH, FL 33738 US

**New Mailing Address:**

**FEI Number:** 59-2192973      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OBIE, MICHAEL R OWNER  
13120 4TH ST E  
MADEIRA BCH, FL 33708 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: OBIE, MICHAEL R.  
Address: 13120 4TH STREET, EAST  
City-St-Zip: MADEIRA BEACH, FL 33708 US

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL R. OBIE

PD

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date