

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 634226

FILED
Jan 31, 2008
Secretary of State

Entity Name: J.D. SMITH EXTERMINATORS OF HUDSON, INC.

Current Principal Place of Business:

15630 COUNTY LINE RD
SPRING HILL, FL 34610 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 3309
SPRING HILL, FL 34611 US

New Mailing Address:

FEI Number: 59-1935677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOZMOSKI, JR. J
600 BYPASS DR
STE 215
CLEARWATER, FL 34624 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: VD () Delete
Name: TAFEL, JOHN H
Address: 8633 HELMSLY DR
City-St-Zip: BAYONET POINT, FL 34667

Title: PD () Delete
Name: SMITH, JAMES D
Address: 8805 MOCCASIN SLOUGH RD
City-St-Zip: INVERNESS, FL 34450

Title: D () Delete
Name: FENLEY, ZERRY,
Address: 632 FISH HATCHERY ROAD
City-St-Zip: LAKELAND, FL

Title: SD () Delete
Name: HOWARD, SANDRA K
Address: 8112 SOMERSET DR
City-St-Zip: LARGO, FL 33773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: JOHN H TAFEL

VD

01/31/2008

Electronic Signature of Signing Officer or Director

Date