

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

FORM 1000 (1-91)
ANNEX A (1-91)

1995



DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA 32316

APPROVED
AND
FILED

DOCUMENT # 660248

(6)

55 MAY 10 AM 10:35

ACTION PEST CONTROL OF NORTHWEST FLORIDA, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

702 TRUETT DRIVE P.O. BOX 20557 TALLAHASSEE FL 32316		702 TRUETT DRIVE P.O. BOX 20557 TALLAHASSEE FL 32316	
2. Filing Fee (See Instructions)		2a. Mailing Address	
21. State of Florida		26. State of Florida	
22. Date of Report		27. Date of Report	
23. Filing Fee		28. Filing Fee	
24. Filing Fee		29. Filing Fee	
25. Filing Fee		30. Filing Fee	
3. Date of Incorporation or Amendment		3a. Date of Last Report	
03/24/1980		05/01/1994	
4. FFI Number		Applied For	
59-1979560		Not Applicable	
5. Certificate of Status Desired		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under S. 190.032, Florida Statutes		Yes ☒ No ☐	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
BAGGS, DOUGLAS C. 702 TRUETT DRIVE TALLAHASSEE FL 32316		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. State	
		85. Zip Code	
		FL	
11. Pursuant to the provisions of Sections 607.01, 607.02, and 607.03, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and registered agent of office in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with and accept the provisions of Sections 607.01, 607.02, Florida Statutes.			
SIGNATURE		DATE	
12. OFFICER'S AND DIRECTOR'S		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
1. NAME		1. NAME	
D BAGGS, DOUGLAS G.			
2. STREET ADDRESS		2. STREET ADDRESS	
702 TRUETT DRIVE			
3. CITY		3. CITY	
TALLAHASSEE FL			
4. NAME		4. NAME	
STD BAGGS, LISE C.			
5. STREET ADDRESS		5. STREET ADDRESS	
702 TRUETT DRIVE			
6. CITY		6. CITY	
TALLAHASSEE FL			
7. NAME		7. NAME	
8. STREET ADDRESS		8. STREET ADDRESS	
9. CITY		9. CITY	
10. NAME		10. NAME	
11. STREET ADDRESS		11. STREET ADDRESS	
12. CITY		12. CITY	
13. NAME		13. NAME	
14. STREET ADDRESS		14. STREET ADDRESS	
15. CITY		15. CITY	

SIGNATURE: Lise C Baggs
*SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/6/95 385-4939