FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 690817

(2)

PROFESSIONAL TERMITE AND PEST CONTROL, INC.

Principal Place	e of Business	Mailing Address			4 120/15 Bills 1214 00/01 (816) 1164 1164 (83)	4 ITOITE GLISO IBLIA COIRT SELES ITOITES CENT STREET STREET STREET STREET STREET STREET		
1020 49TH ST SOUTH ST. PETERSBURG FL 33707		1020 49TH ST SOUTH ST. PETERSBURG FL 33707-3631						
				3. Date Incorporated or Qualified 06/18/1981 3a. Date of Last Report 02/19/1996				
2. Principal Place of Business 2a. Mailing Addres					4. FEI Number	1	Applied For	
21		26	· • •		59-2104290	Not Applicable		
Suite, Apt.	#, et c.		Suite. Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional		
City & Ctor			27			Fe	ee Required	
City & State	ŧ	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be	
Zip	Country Zip		Country		Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032.			
24	25 29 30			,	Florida Statutes Yes X No			
71.	9. Name and Address of Curr		1		10. Name and Address of New Re			
BING	HAM, ROBERT M.		6	Name				
485 - 12 AVENUE NORTH			8	2 Street Ac	Address (P.O. Box Number is Not Acceptable)			
	PETERSBURG FL 33701		P	Sireet At	dress (P.O. Box Number is Not Acceptab	.e)		
			В	3				
				4 City			7:- 0-1-	
			P	4 City		FL 85	Zip Code	
office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida. Such change was a	uthorized t	by the corpo	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of chang t the appointmen	ing its registered nt as registered	
SIGNATURE	Signate typed or providing lend registered.	Chryste	Experience A				······································	
12.		AND DIRECTORS	13.	gent signature re	quired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIREC	CTORS IN 12	
TITLE	DP	DELETE	11 TITLE		7,007,10,10,10,10,10,10	Cha		
NAME	BINGHAM, DONALD H		1 2 NAM					
STREET ADDRESS	1020 49TH ST., S.			ET ADDRESS				
CITY - S1 - ZIP	ST PETERSBURG, FL 00000		14 CHTY	1		33707		
TITLE	ST	DELETE	2 1 TITLE			☐ Che	ange 😾 Addition	
NAME	BINGHAM, BETTY		22 NAMI					
STREET ADDRESS	1020 49TH ST S		23 STRE	et address				
CITY-S1-ZIP	ST PETERSBURG FL		2 4 CITY-ST-ZIP		33707			
TITLE		DELETE	3 1 TITLE		**************************************	☐ Cha	ange 🔲 Addition	
NAME			3.2 NAM			••		
STREET ADDRESS			33 STRE	ET ADDRESS				
CITY - ST - ZIP	\$1000 C.		3.4. DITY	-ST-ZIP				
TITLE		☐ DELETE	41 TITLE			Cha	ange Addition	
NAM E			4 2 NAM	E				
STREET ADDRESS			43 STRE	et address				
CITY+S1-ZIP			4.4 City					
TITLE		L. DELETE	5 1 TITLE			☐ Cha	ange 🔲 Addition	
NAME			5.2 NAMI	l				
STREET ADDRESS			53 STRE	ET ADDRESS				
CITY - S1 - ZIP	***************************************	Figure	5.4 CITY					
THILE		DELETE	61 TITLE	į.		Cha	ange L. Addition	
NAME			62 NAMI	i				
STREET ADDRESS				et address				
CITY-ST-ZIP	magala that the information	and with their filers alone not a self-	64 CITY		tod in Post on 110 07/07/0 Fig. 22- 0:-7	1 6 mb co cost	that the	
informatio Lam an ol	in indicated on this annual report of	r supplementa: annual report is tr or the receiver or trustee empower	ue and accered to exe	curate and the	ted in Section 119.07(3)(i), Florida Statuter nat my signature shall have the same lega port as required by Chapter 607, Florida S	l effect as if mad	le under oath; that	

SIGNATURE: Donald H. Bingham

(813) 323-8866

FILED

Jan 21 1997 8:00am

Secretary of State

Daytime Phone #