2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#714998

FILED Jan 17, 2008 Secretary of State

Entity Name: FLORIDA PEST MANAGEMENT ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

6882 EDGEWATER COMMERCE PARKWAY ORLANDO, FL 32810

Current Mailing Address:

New Mailing Address:

6882 EDGEWATER COMMERCE PARKWAY ORLANDO, FL 32810

FEI Number: 59-0839828

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DEMPSEY, MATTHEW B.

6882 EDGÉWATER COMMERCE PARKWAY

ORLANDO, FL 32810

FUGLER, ALLEN M 6882 EDGEWATER COMMERCE PARKWAY

ORLANDO, FL 32810 US

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: ALLEN M FUGLER

01/17/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete POMFRET, DAVID Name: P.O. BOX 4093 Address:

City-St-Zip: SARASOTA, FL 34230

Title: () Delete LEGGETT, JENNIFER Name: Address: 2134 HAINES ST.

City-St-Zip: JACKSONVILLE, FL 32206

Title: () Delete WILLIAMSON, JIM Name: 1406 TECH BLVD Address: City-St-Zip: TAMPA, FL 33619

Title: () Delete Name: BROCK, TIM

Address: 802 W HWY 90 City-St-Zip: LYNN HAVEN, FL 32444

Title: () Delete NOLEN, DAVID Name: 5400 BROADWAY Address:

City-St-Zip: W. PALM BEACH, FL 33407

Title: () Delete HULETT, TIM Name: Address: 7670 OKEECHOBEE BLVD. W. PALM BEACH, FL 33411 City-St-Zip:

(X) Change () Addition

LEGGETT, JENNIFER Name: Address: 2134 HAINES ST. City-St-Zip: JACKSONVILLE, FL 32206

Title: (X) Change () Addition

Name: NOLEN, MICKEY Address: 5400 BROADWAY

City-St-Zip: W. PALM BEACH, FL 33407

Title: (X) Change () Addition

HULETT, TIM Name:

Address: 7670 OKEECHOBEE BLVD. City-St-Zip: W. PALM BEACH, FL 33411

Title: (X) Change () Addition

Name: WILLIAMSON, JIM Address: 1406 TECH BLVD City-St-Zip: TAMPA, FL 33619

Title: (X) Change () Addition

BROCK, TIM Name: 802 W HWY 90 Address: City-St-Zip: LYNN HAVEN, FL 32444

Title: (X) Change () Addition

BRAKER, GEORGE Name:

Address: 2200 NW BOCA RATON BLVD STE 111

BOCA RAON, FL 33431 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLEN M FUGLER **EVP**

Electronic Signature of Signing Officer or Director

01/17/2008 Date