

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 818129 (9)

1. Corporation Name

ORKIN EXTERMINATING COMPANY, INC.



Principal Place of Business

2170 PIEDMONT ROAD, N.E.
ATLANTA GA 30324

Mailing Address

CORPORATE TAXES
2170 PIEDMONT RD. N.E.
ATLANTA GA 30324

3. Date Incorporated or Qualified
08/20/1964

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

58-0942031

Applied For

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and filed if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME
ST
SMITH, GENE L
2170 PIEDMONT RD. NE
ATLANTA GA 30324

12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

TITLE ☐ DELETE

2.1 TITLE ☒ Change ☐ Addition

NAME
DP
ROLLINS, GARY
2170 PIEDMONT RD N E
ATLANTA GA

22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

TITLE ☐ DELETE

3.1 TITLE ☒ Change ☐ Addition

NAME
V
STEVENS, VINCE
2170 PIEDMONT RD N E
ATLANTA GA

32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

TITLE ☐ DELETE

4.1 TITLE ☒ Change ☐ Addition

NAME
D
ROLLINS, R RANDALL
2170 PIEDMONT RD N E
ATLANTA GA

42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

TITLE ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Gene L. Smith* Gene L. Smith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/96 (404) 888-2064
Date Daytime Phone #

CR2E034 (12/95)