

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

FILED
May 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F01843** (4)
1. Corporation Name
ACE PEST CONTROL OF FROSTPROOF, INC.



Principal Place of Business 2251 CR 630 WEST P. O. BOX 1028 FROSTPROOF FL 33843	Mailing Address 2251 CR 630 WEST P. O. BOX 1028 FROSTPROOF FL 33843-1028
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2. Principal Place of Business 21 Sulte, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Sulte, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 10/16/1980	3a. Date of Last Report 05/01/1996
				4. FET Number 59-2035541	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 BRANTLEY, JOHNNY 2251 CR 630 WEST FROSTPROOF FL 33843		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BRANTLEY, JOHNNY	1.2 NAME	
STREET ADDRESS	2251 CR 630 WEST	1.3 STREET ADDRESS	
CITY-ST-ZIP	FROSTPROOF FL	1.4 CITY-ST-ZIP	
TITLE	VP ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	MOSER, JAMES L., JR.	2.2 NAME	
STREET ADDRESS	51 HERNDON ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	FROSTPROOF FL	2.4 CITY-ST-ZIP	
TITLE	ST ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	BRANTLEY, MARY LOU	3.2 NAME	
STREET ADDRESS	2251 CR 630 WEST	3.3 STREET ADDRESS	
CITY-ST-ZIP	FROSTPROOF FL	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Mary Lou Brantley* H-20-97 911.125-8051

CR2E034 (9/96)