

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000001884

**FILED**  
**Jan 03, 2012**  
**Secretary of State**

**Entity Name:** PEACHTREE PEST CONTROL CO., INC.

**Current Principal Place of Business:**

1394 INDIAN TRAIL RD  
NORCROSS, GA 30093

**New Principal Place of Business:**

**Current Mailing Address:**

1394 INDIAN TRAIL RD  
NORCROSS, GA 30093

**New Mailing Address:**

**FEI Number:** 58-1268466

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KNOWLES, BOBBY  
14131 LEICESTER LANE  
ORLANDO, FL 32828 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: ARNOLD, COREY  
Address: 1394 INDIAN TRAIL RD  
City-St-Zip: NORCROSS, GA 30093

Title: VP  
Name: ARNOLD, JIMMY  
Address: 3231 CYPRESS MILL RD  
City-St-Zip: BRUNSWICK, GA 31525

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: COREY ARNOLD

PRES

01/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date