2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F34145

1. Entity Name
CROWN PEST CONTROL CO.

Principal Place of Business
1420 CESERY BLVD.
JACKSONVILLE, FL 32211   US

Mailing Address
1420 CESERY BLVD.
JACKSONVILLE, FL 32211   US

DO NOT WRITE IN THIS SPACE

07192006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
59-2100743	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PRIVETTE, GEORGE A.
1420 CESERY BLVD.
JACKSONVILLE, FL 32211

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

U00000572415
07/27/06--80004--024 150.00

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HORD, JACK C
STREET ADDRESS	1420 CESERY BLVD
CITY-ST-ZIP	JACKSOVILLE, FL 00000,

TITLE	V
NAME	PRIVETTE, GEORGE A.
STREET ADDRESS	1420 CESERY BLVD
CITY-ST-ZIP	JACKSONVILE, FL 32211

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: _George Privette_   7/21/06   904-743-1132

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #