## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F45880

FILED Apr 07, 2009 Secretary of State

Entity Name: LARUE PEST MANAGEMENT, INC.

Current Principal Place of Business:			New Principal Place of Business:	
	. 8TH ST. CRES, FL 33	3971		
Current Mailing Address:			New Mailing Address:	
.O. BOX EHIGH A	1253 CRES, FL 33	3970		
El Number	: 59-2129067	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
ame and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
UEBELIN 19 ROBI	NG, LARRYK			
	CRES, FL 33	3936 US		
EHIGH A	CRES, FL 33		ne purpose of changing its registere	ed office or registered agent, or both,
EHIGH A	CRES, FL 33 e named entity e of Florida.  RE:	submits this statement for the		d office or registered agent, or both,
EHIGH Anne above the Stati	e named entity e of Florida. RE: Electro	v submits this statement for the		od office or registered agent, or both,  Date
EHIGH A ne above the State IGNATU ection Ca	e named entity e of Florida. RE: Electro	v submits this statement for the submits this statement for the submits this statement for the submits statement for the s	Agent	
EHIGH A ne above the State IGNATU ection Ca	e named entity e of Florida.  RE: Electro  mpaign Financia  S AND DIRECTO  RUEBELING, 119 ROBERT	onic Signature of Registered ong Trust Fund Contribution ( ).  CTORS:  ) Delete FAY,	Agent	Date
EHIGH A ne above the State GNATU ection Car FFICER le: le: lme: dress:	e named entity e of Florida.  RE: Electro  mpaign Financi  S AND DIRECTO  STD ( RUEBELING, 119 ROBERT LEHIGH ACRI  DP ( RUEBELING, 119 ROBERT	onic Signature of Registered ong Trust Fund Contribution ( ).  CTORS:  ) Delete FAY, AVE. ES, FL 33936  ) Delete LARRY K,	Agent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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

SIGNATURE: KEITH D. RUEBELING VP 04/07/2009