## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

P.O. BOX 1253

5611 S.W. 8TH ST.

## F45880 DOCUMENT #

1. Entity Name

5611 S.W. 8TH ST.

P.O. BOX 1253

Principal Place of Business

LARUE PEST MANAGEMENT, INC.



**FILED** Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91444 027 \*\*\*150.00

OF THE STA
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LEHIGH ACRES FL 33970		LEHIGH ACRES FL 33970							
2. Principal Place of Business		3. Mailing Address			}	/	1 <b>8011 01876 190</b> 1		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. FEI	Number <b>59-2129067</b>	<u> </u>	pplied For ot Applicable		
Zip	Country	Zip	Country	<b>5.</b> Cer	5. Certificate of Status Desired   \$8.75 Additional Fee Required				
	6. Name and Address of Current	Registered Agent	-	7. Name and Address of New Registered Agent					
	garage stands to the second		Name	Name					
RUEBELIN	ig, larryk								
5611 SW			Street A	Street Address (P.O. Box Number is Not Acceptable)					
	CRES FL 33970								
LETION A	CHES FL 339/U								
			City	City FL Zip Code					
	named entity submits this statement for	r the purpose of changing its r	registered office o	r registered agent	, or both, in the State of Florida. I am	familiar with,	and accept		
the obligations of registered agent.									
		-							
SIGNATURE.	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered Agent signat	ture required when reinst.	ating) DATE		<del></del> }		
	ILE NOW!!! FEE IS \$150.00				9. Election Campaign Financing	\$5.0	<b>)0</b> May Be		
	May 1, 2003 Fee will be \$550.00	Cana				Added	d to Fees		
wake Check	Payable to Florida Department of		_		-				
10.	, OFFICERS AND	DIRECTORS	11.	ADDI	TIONS/CHANGES TO OFFICERS AN		S IN 11		
TITLE	STD	☐ Delete	TITLE			Change	☐ Addition		
NAME	RUEBELING, FAY		NAME			<i>,</i> (			
STREET ADORESS	119 ROBERT AVE.		STREET ADDRESS				l		
CITY-ST-ZIP	LEHIGH ACRES, FL 00000		CITY-ST-ZIP	Lchigh	<u> Acres, FL 33972</u>	<u> </u>			
ITLE	DP	☐ Delete	TITLE		Acres, FL 33972	Change	Addition		
NAME	RUEBELING, LARRY K	•	NAME	1		/\			
STREET ADDRESS	119 ROBERT AVE.		STREET ADDRESS		,				
CITY-ST-ZIP	LEHIGH ACRES, FL 00000		CITY-ST-ZIP	Lehigh	Acres, FL 3397	· ·			
ITLE	VP	☐ Delete	TITLE			Change	☐ Addition		
NAME .	RUEBELING, KEITH _ D ,	المحمد و المحمد	NAME			_i			
STREET ADDRESS	* 1111 <u> </u>			Lehigh Acres, FL 33972  Change Addition  6021 LAKE Grasmere Way					
CITY-ST-ZIP	FT MYERS FL		CITY-ST-ZIP	<i>Ft My</i>	ters FL 33908		ì		
TITLE		☐ Delete	TITLE	•		☐ Change	☐ Addition		
IAME		<b>—</b> 00.000	NAME	ļ		,			
STREET ADDRESS I			STREET ADDRESS				}		
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE		•	Change	Addition		
IAME		C Delete	NAME			Ontarigo			
STREET ADDRESS			STREET ADDRESS				1		
CITY-ST-ZIP			CITY-ST-ZIP				{		
		, <u>– – </u>		1					
TLE	green polymeration cause	` Delete	TITLE	1		☐ Change	☐ Addition		
IAME		•	NAME expect apprece		•				
STREET ADDRESS	market and andrewalthing	ا المحافظة المستقدمة المرابع الراجانية المرابع المستقدمة المرابع المرابع المرابع المرابع المرابع المرابع المرابع	STREET ADDRESS	- たたかな、も本代ヤ本人	· · · · · · · · · · · · · · · · · · ·	1988 198 (			
111-21-ZIP.   (!	MALL COMPANIES AND WITH THE WASHINGTON	名:我们都在省市大学社会通过企业的企业大会会的。	CHT-SI-ZIP + A		•				

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 han a force or director of the corporation of 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 the empowered.