

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002549

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: PESTMASTER SERVICES, INC.

## Current Principal Place of Business:

3490 ST. AUGUSTINE ROAD  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

## Current Mailing Address:

137 E. SOUTH STREET  
BISHOP, CA 93514

## New Mailing Address:

FEI Number: 95-3718404

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OWEN, BRENDA  
3490 ST. AUGUSTINE ROAD  
JACKSONVILLE, FL 32207 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: VAN DIEPEN, JEFFREY M  
Address: 1250 RUDOLPH ROAD  
City-St-Zip: BISHOP, CA 93514

Title: V ( ) Delete  
Name: PFERSICH, LILLIAN  
Address: 6360 CORY STREET  
City-St-Zip: SIMI VALLEY, CA 93063

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: BRANDIE L BOOTHE

A

04/23/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date