

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G28431

FILED  
Apr 21, 2012  
Secretary of State

**Entity Name:** AERO PEST CONTROL, INC.

**Current Principal Place of Business:**

EAST HWY. 44  
CRYSTAL RIVER, FL 34423 US

**New Principal Place of Business:**

**Current Mailing Address:**

EAST HWY. 44  
P.O. BOX 454  
CRYSTAL RIVER, FL 344230454 US

**New Mailing Address:**

P O BOX 454  
CRYSTAL RIVER, FL 34423

**FEI Number:** 59-2277852

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MEAHL, RICHARD C PRES  
EAST HWY 44  
CRYSTAL RIVER, FL 34423 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: P  
Name: MEAHL, RICHARD C  
Address: HWY 44 E P O BOX 454  
City-St-Zip: CRYSTAL RIVER, FL 344230454 US

Title: D  
Name: MEAHL, CYNTHIA L  
Address: P.O. BOX 454  
City-St-Zip: CRYSTAL RIVER, FL 344230454 US

Title: V  
Name: MEAHL, RICHARD CHAD  
Address: 13135 S MOONRAKER TERRACE  
City-St-Zip: FLORAL CITY, FL 34436 US

Title: D  
Name: RENEAU, RENEE M  
Address: 905 SWEET PINE POINT  
City-St-Zip: INVERNESS, FL 34452 US

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: RICHARD C. MEAHL

PRES

04/21/2012

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

\_\_\_\_\_  
Date