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FILED
Aug 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H54591 (3)
1. Corporation Name
J. D. SMITH EXTERMINATORS OF DADE CITY, INC.

Principal Place of Business

15630 COUNTY LINE ROAD
P.O. BOX 5419
SPRING HILL FL 34606

Mailing Address

15630 COUNTY LINE ROAD
P.O. BOX 5419
SPRING HILL FL 34606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/01/1985

4. FEI Number

59-2511921

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

2. Principal Place of Business

21 15630 COUNTY LINE RD

Suite, Apt. #, etc.

22

City & State

23 SPRING HILL FL

Zip

24 34610

Country

25 PASCO

2a. Mailing Address

26 P.O. BOX 5419

Suite, Apt. #, etc.

27

City & State

28 SPRING HILL FL

Zip

29 34611

Country

30 HERMANDO

9. Name and Address of Current Registered Agent

DALTON, ROBERT P.
1198 MUSCOVY DR.

SPRING HILL FL 34608

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DALTON, ROBERT P.

STREET ADDRESS 1198 MUSCOVY DR.

CITY-ST-ZIP SPRING HILL FL

TITLE ☐ DELETE

NAME SD TAFEL, JOHN H.

STREET ADDRESS 18528 GRACIE LEE LN

CITY-ST-ZIP SPRING HILL FL

TITLE ☐ DELETE

NAME PD SMITH, JAMES D., SR

STREET ADDRESS 8787 E. MOCCASIN SLOHRD

CITY-ST-ZIP INVERNESS FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert P. Dalton

ROBERT P. DALTON

6-14-98 732-856-7328

CR2E034 (10/97)