FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 97 HAY 12 PM 12: 23 1997 DIVISION OF CORPORATIONS **DOCUMENT # J81336** SECRETARY OF STATE TALLAHASSEE FLORIDA (6)HOLLON EXTERMINATING, INC. Mailing Address Principal Place of Business 10010 OLD DADE CITY ROAD 10010 OLD DADE CITY ROAD LAKELAND FL 33810-8044 LAKELAND FL 33809 3. Date Incorporated or Qualified 3a. Date of Last Report 07/07/1987 02/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2837554 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country 6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 30 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VINING, C. GEOFFREY 10010 OLD DADE CITY ROAD 82 Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33807 83 64 City **B**5 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, typical or printed name of registered agent and tire if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE 11706 Change Addition DIL 700002184107--HOLLON, ALAN MICHAEL 1.2 NAME NAME -05/19/97--01191--022 10010 OLD DADE CITY RD. STREET ADDRESS 1.3 STREET ADDRESS ****550.00 ****550.00 LAKELAND FL 1.4 CITY - ST - ZIP 0:1Y-51-7IF DILE DELETE 2.1 TITLE Addition HOLLON, ANGELA KAREN NAME 22 NAME 10010 OLD DADE CITY RD. STREET ADDRESS 2.3 STREET ADDRESS LAKELAND FL CITY SI-76 2 4 CITY-ST-7IP DELETE Change Addition Hit€ 3.1 TITLE 3 2 NAME NAM: 3.3 STREET ADDRESS STREET ACCURESS COTY-ST ZIE 3 4. CITY - ST - ZIP DELETE 4.1 TITLE Change ☐ Addition THE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-\$1-ZIP CHTY-\$1-206 DELETE Change Addition $\Pi^{*}\Pi$ 5.1 TITLE 5.2 NAM6 5.3 STREET ADDRESS STREET ADORESS 5.4 CITY-ST-ZIP DUY-SI-7/2 DELETE Change Addition 10.4 6.1 TITLE 6.2 NAME NAM: 6.3 STREET ADORESS STHEFT: ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. I do 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 Lanuari 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 national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and that my national contents are required by Chapter 607, Florida Statutes; and the contents are required by Chapter 607, Florida Statutes; and the contents are required by Chapter 607, Florida Statutes; and the contents are required by Chapter 607, Florida Statutes; and the contents are required by Chapter 607, Florida Statutes; and the contents are required by Chapter 607, Florida Statutes; and the contents are required by Chapter 607, Florida Statutes; and the contents are required by Chapter 607, Florida Statutes; and the contents are required by Chapter 607, Florida Statutes; and the contents are required by Chapter 607, Florida Statutes; and the contents are required by Chapter 607, Florida Statutes; and the contents are required by florida Statutes for the contents are required by florida Statutes for the contents are required by florida Statutes for the cont appears in Block 12 or Block 13 if changed, or on an attachment with an address.