

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 12, 2003 8:00 am
Secretary of State

02-12-2003 90132 033 ***150.00

DOCUMENT # J98274

1. Entity Name
BRACKETT'S PEST CONTROL, INC.



Principal Place of Business

~~1020 COOPER DRIVE~~
NAPLES FL 33940

Mailing Address

~~1020 COOPER DRIVE~~
NAPLES FL 33940

10013710



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3491 23RD AVE SW

3. Mailing Address

3491 23rd Ave SW

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples, FL

City & State

Naples, FL

4. FEI Number

65-0019312

Applied For

Not Applicable

Zip

Country

34117

USA

Zip

Country

34117

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION INFORMATION SERVICES INC
1201 HAYES ST
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME **BRACKETT, DOUGLAS D.**
STREET ADDRESS **1328 COOPER DR**
CITY-ST-ZIP **NAPLES FL**

TITLE **VP** ☐ Delete
NAME **HARTTER, WILLIAM**
STREET ADDRESS **3491 23RD AVE SW**
CITY-ST-ZIP **NAPLES FL 34117**

TITLE **VP** ☐ Delete
NAME **EIDSON, JESSE D**
STREET ADDRESS **3225 19TH AVE SW**
CITY-ST-ZIP **NAPLES FL 34117**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P** ☒ Change ☐ Addition
NAME **HARTTER, WILLIAM**
STREET ADDRESS **3491 23rd Ave SW**
CITY-ST-ZIP **Naples, FL. 34117**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William E. Hartter - PRES.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/03 **1-239-261-0953**
Date Daytime Phone #

CR2E034 (10/02)