

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K69065

FILED
Jul 05, 2007
Secretary of State

Entity Name: ATLANTIC PEST CONTROL AND LAWN SPRAYING, INC.

Current Principal Place of Business:

116 SHORE DRIVE
P.O. BOX 759
OZONA, FL 34660

New Principal Place of Business:

137 SHORE DRIVE
OZONA, FL 34660

Current Mailing Address:

116 SHORE DRIVE
P.O. BOX 759
OZONA, FL 34660

New Mailing Address:

137 SHORE DRIVE
OZONA, FL 34660

FEI Number: 59-2934257

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACCARONI, LYDIA
116 SHORE DRIVE
OZONA, FL 34660 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MACCARONI, LYDIA
Address: 116 SHORE DRIVE
City-St-Zip: OZONA, FL 34660

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LYDIA MACCARONI

P

07/05/2007

Electronic Signature of Signing Officer or Director

Date