

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000001818

FILED
May 11, 2010
Secretary of State

Entity Name: CONTROL PEST MANAGEMENT, LLC

Current Principal Place of Business:

370 MONROE ROAD
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

PO BOX 531012
DEBARY, FL 327531012

New Mailing Address:

FEI Number: 04-3588945 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

KOHLER, GALE
51 GRACIE ROAD
DEBARY, FL 32713 US

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: KOHLER, STEPHEN G
Address: 51 GRACIE ROAD
City-St-Zip: DEBARY, FL 32713

Title: MGRM
Name: LEE, DOUGLAS C
Address: 166 BRIARWOOD DRIVE
City-St-Zip: DEBARY, FL 32713

Title: MGRM
Name: ANDERSON, DANIEL J
Address: 10121 CLAIRMEL COURT
City-St-Zip: ORLANDO, FL 32817

Title: MGRM
Name: KOHLER, GALE M
Address: 51 GRACIE ROAD
City-St-Zip: DEBARY, FL 32713

Title: MGRM
Name: LEE, DARRELL
Address: 165 LAGO VISTA BLVD
City-St-Zip: CASSELBERRY, FL 32707 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GALE KOHLER

MGRM

05/11/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date