2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000038429

FILED Feb 25, 2004 8:00 am Secretary of State 02-25-2004 90285 001 ****50.00

Daytime Phone #

1. Entity Name COLLINS PEST INSPECTIONS, LLC									
Principal Place of Business 5301 GROVE MANOR LÄDY LAKE, FL 32159		Mailing Address 5301 GROVE MANOR LADY LAKE, FL 32159		24014430					
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01202004	Chg-LLC	CR2	E083 (10/03)	
City & State		City & State			4. FEI Numbe	529114	7	 	plied For at Applicable
Zip	Country	Zip	Country		5. Certificate	of Status Desire	ed 🗆	\$5.00 Add Fee Require	
-	6. Name and Address of Current	Registered Agent	Name	-	7. Name and	Address of Ne	w Registere	d Agent	
4420 BEAC	, ROGER C CON CIR. .M BEACH, FL 33401			ddress (P.O. Box Numbe	r is Not Accept	able)		
			- City		· ,,,,,		F	L Zip Code	e
the obligati	named entity submits this statement for ons of registered agent. Signature, typed or printed name of registered agent		registered office o			h, in the State o	f Florida. I a		and accept
Fi	ling Fee is \$50.00 se by May 1, 2004				1 		lake check	payable to	
9.	MANAGING MEMBI		10.	1 22 5		ADDITIO	NS/CHANG		A/
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delate	TITLE NAME STREET ADDRESS CITY-ST-ZIP	7re	nager endo J. col ol Grove dy Lake	MENOT	2159	☐ Change	Addition
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11. I hereby of indicated limited lia	certify that the information supplied wit on this report is true and accurate and bility company or the receiver or truste	h this filing does not qualify for d that my signature shall have t se empowered to execute this	the exemption sta the same legal effe report as required	ted in Se ect as if n by Chap	ection 119.07(3)(i made under oath oter 608, Florida 5), Florida Statut ; that I am a ma Statutes.	es. I further o	certify that the in ober or manage	nformation er of the