## 2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

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## DOCUMENT # L06000036428

PITTMAN & SON PEST CONTROL, LLC



FILED Jan 28, 2008 08:00 Al Secretary of State

Principal Place of Business

4730 SE 17TH AVE. OCALA, FL 34480

Mailing Address

4730 SE 17TH AVE. OCALA, FL 34480



01222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 320-465846

Applied For Not Applicable Not Applicable

5. Certificate of Status Desired \$5.00 Additional

Fee Required

6. Name and Address of Current Registered Agent

PITTMAN, WILLIAM R 4730 SE 17TH AVE. OCALA, FL 34480

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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 \$138.75 After May 1, 2008 Fee will be \$538.75

IJ000000803258 /05/08-80016-024 138.75

MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME PITTMAN, WILLIAM R STREET ADDRESS 4730 SE 17TH AVE CITY-ST-ZIP OCALA, FL 34480 MGR PITTMAN, PAMELA J STREET ADDRESS 4730 SE 17TH AVE CITY-ST-ZIP OCALA, FL 34480 TITLE MGR NAME PITTMAN, JOSHUA A 4208 SE 22ND ST STREET ADDRESS OCALA, FL 34474 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-7IP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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.

TIBE. William R. Littman