# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**May 17, 2010**
**Secretary of State**

DOCUMENT# L08000076201

**Entity Name:** BILL WILSON'S PEST SOLUTIONS, LLC

**Current Principal Place of Business:**

10641 WOOD IBIS AVE
BONITA SPRINGS, FL 34135 US

**New Principal Place of Business:**

**Current Mailing Address:**

10641 WOOD IBIS AVE
BONITA SPRINGS, FL 34135 US

**New Mailing Address:**

**FEI Number: 26-3020082** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILSON, WILLIAM F
10641 WOOD IBIS AVE
BONITA SPRINGS,FL., FL 34135 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR
Name: WILSON, WILLIAM F
Address: 10641 WOOD IBIS AVE
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: MGRM
Name: WILSON, BETTY L
Address: 10641 WOOD IBIS AVE
City-St-Zip: BONITA SPRINGS, FL 34135 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 Statues.

SIGNATURE: WILLIAM F. WILSON MGR 05/17/2010

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