

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000081212

FILED
Jan 18, 2009
Secretary of State

Entity Name: PATRIOT PEST MANAGEMENT OF NORTHWEST FL LLC

Current Principal Place of Business:

5609 WHISPERING WOODS DR
PACE, FL 32571 US

New Principal Place of Business:

Current Mailing Address:

5609 WHISPERING WOODS DR
PACE, FL 32571 US

New Mailing Address:

4960 HWY 90 #124
PACE, FL 32571 US

FEI Number: 26-3308205

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BYRD, DARRYL W
5609 WHISPERING WOODS DR
PACE, FL 32571 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 () Delete
Name: DARRYL, BYRD W
Address: 5609 WHISPERING WOODS DR
City-St-Zip: PACE, FL 32571 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: BYRD, GENEVIEVE M
Address: 5609 WHISPERING WOODS DR
City-St-Zip: PACE, FL 32571 US

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 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: DARRYL W BYRD

MGR

01/18/2009

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