

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000113455

FILED
Apr 30, 2009
Secretary of State

Entity Name: EAGLE PEST CONTROL OF BREVARD, LLC

Current Principal Place of Business:

5575 SCHENCK AVENUE
UNIT 3
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

1469 WELLINGTON CIRCLE
ROCKLEDGE, FL 32955 US

Current Mailing Address:

5575 SCHENCK AVENUE
UNIT 3
ROCKLEDGE, FL 32955 US

New Mailing Address:

1469 WELLINGTON CIRCLE
ROCKLEDGE, FL 32955 US

FEI Number: 26-3886075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, JAMES
5575 SCHENCK AVENUE
UNIT 3
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

LEDBETTER, DANIEL J
1469 WELLINGTON CIRCLE
ROCKLEDGE, FL 32955 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: DANIEL J. LEDBETTER

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ADAMS, JAMES
Address: 5575 SCHENCK AVENUE
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: MGRM (X) Delete
Name: LEDBETTER, DAN
Address: 5575 SCHENCK AVENUE
City-St-Zip: ROCKLEDGE, FL 32955 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEDBETTER, DANIEL J
Address: 1469 WELLINGTON CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955 US

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

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: DANIEL J LEDBETTER

MGR

04/30/2009

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