

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000024766

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Entity Name:** NOBILE PEST SOLUTIONS LLC

**Current Principal Place of Business:**

12112 SUMMER MEADOWS DR.  
BRADENTON, FL 34202

**New Principal Place of Business:**

**Current Mailing Address:**

12112 SUMMER MEADOWS DR.  
BRADENTON, FL 34202

**New Mailing Address:**

**FEI Number:** 26-4495685

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NOBILE, RONALD G  
12112 SUMMER MEADOWS DR.  
BRADENTON, FL 34202 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:** NOBILE, RONALD G  
**Address:** 12112 SUMMER MEADOWS DR.  
**City-St-Zip:** BRADENTON, FL 34202

**Title:** MGRM  
**Name:** NOBILE, SANDRA J  
**Address:** 12112 SUMMER MEADOWS DR.  
**City-St-Zip:** BRADENTON, FL 34202

**Title:** MGRM  
**Name:** NOBILE, RICHARD V  
**Address:** 4107 MAVERICK AVE  
**City-St-Zip:** SARASOTA, FL 34233

**Title:** MGRM  
**Name:** NOBILE, CHRISTOPHER M  
**Address:** 3071 SUNSET BEACH  
**City-St-Zip:** VENICE, FL 34293

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 Statutes.

**SIGNATURE:** RONALD G. NOBILE

MGR

01/19/2011

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