

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000071890

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** CARLISLE PEST CONTROL LLC

**Current Principal Place of Business:**

10906 SW 86TH DR  
GAINESVILLE, FL 32608 US

**New Principal Place of Business:**

**Current Mailing Address:**

5745 SW 75 ST  
#143  
GAINESVILLE, FL 32608 US

**New Mailing Address:**

**FEI Number:** 27-2995785      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CARLISLE, JAMES W  
10906 SW 86TH DR  
GAINESVILLE, FL 32608 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: CARLISLE, JAMES W  
Address: 10906 SW 86TH DR  
City-St-Zip: GAINESVILLE, FL 32608 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 Statutes.

SIGNATURE: JAMES W. CARLISLE      MGR      04/30/2012

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