

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000094497

FILED
Jul 05, 2012
Secretary of State

Entity Name: PEST MANAGEMENT SYSTEMS LLC

Current Principal Place of Business:

561 WHISPERING PINE LN
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

561 WHISPERING PINE LN
NAPLES, FL 34103

New Mailing Address:

FEI Number: 45-3056201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDERS, JOHN
561 WHISPERING PINE LN
NAPLES, FL 34103 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: MGRM
Name: SANDERS, JOHN
Address: 561 WHISPERING PINE LN
City-St-Zip: NAPLES, FL 34103

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: JOHN SANDERS

PRES

07/05/2012

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