

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L16078

FILED
Apr 20, 2007
Secretary of State

Entity Name: PERSCHEL & MEYER PEST MANAGEMENT, INC.

Current Principal Place of Business:

1181-1183 S 10TH ST
JACKSONVILLE BEACH, FL 32250 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 50099
JACKSONVILLE BEACH, FL 32240 US

New Mailing Address:

FEI Number: 59-2967235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEYER, ROBERT H JR
1181 - 1183 S 10TH ST
JACKSONVILLE BEACH, FL 32250 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DVT () Delete
Name: PERSCHEL, MARK K SR,
Address: 1865 NIGHTFALL DR
City-St-Zip: NEPTUNE, FL 32266

Title: DPS () Delete
Name: MEYER, ROBERT H JR,
Address: 719 MCCULLUM CIR
City-St-Zip: NEPTUNE BEACH, FL

Title: D () Delete
Name: MEYER, TERI,
Address: 719 MCCULLUM CIRCLE
City-St-Zip: NEPTUNE BEACH, FL

Title: D () Delete
Name: PERSCHEL, LINDA,
Address: 1865 NIGHTFALL DR
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT H. MEYER, JR.

DPS

04/20/2007

Electronic Signature of Signing Officer or Director

Date