SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

FILED
Sep 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L26036 **(8)**

1. Corporation Name
TARGET PEST SERVICES, INC.

Principal Place of Business	Mailing Address
2175 KINGSLEY AVE. STE. 320 ORANGE PARK FL ~~32067~~ 32073	2175 KINGSLEY AVE. STE. 320 ORANGE PARK FL ~~32067~~ 32073

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/25/1989	3a. Date of Last Report: 11/06/1996
4. FEI Number: 59-2974771	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees.
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21	26 P.O. Box 2189
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Orange Park, FL.
Zip 24 32073 Country 25	Zip 29 32073 Country 30 CLAY

9. Name and Address of Current Registered Agent

STEVENS, RONNIE L., JR.
2175 KINGSLEY AVE.
STE. 320
ORANGE PARK FL ~~32067~~ 32073

10. Name and Address of New Registered Agent

81 Name: Ronnie L. Stevens, Sr.
82 Street Address (P.O. Box Number is Not Acceptable): 2175 Kingsley Ave.
83 STE 320
84 City: Orange Park FL 85 Zip Code: 32073

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Ronnie L. Stevens (Signature, typed or printed name of person executing document, and title if applicable) L. (Ronnie L. Stevens Sr.) President (NOTE: Registered Agent signature required when reinstating) DATE: 8-29-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	STEVENS, RONNIE L. Sr.	1.2 NAME	
STREET ADDRESS	2175 KINGSLEY AVE., STE. 320	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE PARK FL ~~32067~~ 32073	1.4 CITY-ST-ZIP	
TITLE	STD ☑ DELETE	2.1 TITLE	STD ☐ Change ☑ Addition
NAME	STEVENS, SUSAN K.	2.2 NAME	June Stevens
STREET ADDRESS	2175 KINGSLEY AVE., STE. 320	2.3 STREET ADDRESS	2175 Kingsley Ave. STE 320
CITY-ST-ZIP	ORANGE PARK FL ~~32067~~ 32073	2.4 CITY-ST-ZIP	Orange Park, FL. 32073
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (4/97)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 8-29-97 904-276-0600