

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L87974

FILED
Apr 27, 2002 8:00 AM
Secretary of State

Entity Name: PROFESSIONAL PEST CONTROL PRODUCTS OF ORLANDO, INC.

Current Principal Place of Business:

8355 HIGHWAY 17-92
FERN PARK, FL 32730 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 941310
ATLANTA, GA 31141 US

New Mailing Address:

FEI Number: 59-3027768

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, BRENDA Y
8135 NW 80TH AVENUE
OCALA, FL 34482

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CLINE, THOMAS W III
Address: 5865 CHIMNEY SPRING ROAD
City-St-Zip: BUFORD, GA

Title: SD () Delete
Name: CLINE, CYNTHIA A.,
Address: 3170 CLAIRWOOD TERR
City-St-Zip: ATLANTA, GA

Title: P () Delete
Name: CLINE, THOMAS W., JR.,
Address: 2646 RIDGEHURST DR
City-St-Zip: BUFORD, GA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CLINE, THOMAS W III
Address: 5865 CHIMNEY SPRING ROAD
City-St-Zip: BUFORD, GA 30518

Title: SD (X) Change () Addition
Name: CLINE, CYNTHIA A.,
Address: 3170 CLAIRWOOD TERR
City-St-Zip: ATLANTA, GA 30341

Title: P (X) Change () Addition
Name: CLINE, THOMAS W., JR.,
Address: 2646 RIDGEHURST DR
City-St-Zip: BUFORD, GA 30518

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS W. CLINE, JR

P

04/27/2002

Electronic Signature of Signing Officer or Director

_____ Date