2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L91867

FILED Mar 14, 2005 Secretary of State

Entity Name: SPENCER PEST CONTROL CO. OF FLORIDA INC

Entity Nai	IIIe. SPENCEI	R PEST CONTROL CO. OF F	·LORIDA, INC.		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 100	KHAM ROAD) RNE, FL 32940) US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
PO BOX 2 ROSWELL	117 _, GA 3007721	17 US	-		
FEI Number:	: 58-1907301	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
SCHROEDER, SHERYL S 854 MIRACLE MILE VERO BEACH, FL 32960 US			6055 WICKHAM ROA SUITE 100	SCHROEDER, SHERYL S 6055 WICKHAM ROAD SUITE 100 MELBOURNE, FL 32940 US	
The above in the State	named entity s e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE:				03/14/2005	
	Electron	ic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DT () SPENCER, BILI 205 NORCROS ROSWELL, GA	S STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DS () SPENCER, PAT 205 NORCROS ROSWELL, GA	S STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DP () SCHROEDER, 3 6055 WICKHAN MELBOURNE, I	/I ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: BILL L SPENCER DT 03/14/2005