

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L92611

**FILED**  
**Apr 06, 2012**  
**Secretary of State**

**Entity Name:** PEST CONTROL GENERAL STORE, INC.

**Current Principal Place of Business:**

2636 U.S. HIGHWAY 19  
HOLIDAY, FL 34691 US

**New Principal Place of Business:**

**Current Mailing Address:**

2636 U.S. HIGHWAY 19  
HOLIDAY, FL 34691 US

**New Mailing Address:**

**FEI Number:** 59-3044059

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WADDELL-GIORDANO, MONA L  
2636 U.S. HIGHWAY 19  
HOLIDAY, FL 34691 US

**Name and Address of New Registered Agent:**

GIORDANO, RAMONA L  
2636 U.S. HIGHWAY 19  
HOLIDAY, FL 34691 US

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:** RAMONA L. GIORDANO

04/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** GIORDANO, RAMONA L  
**Address:** 2636 US HIGHWAY 19  
**City-St-Zip:** HOLIDAY, FL 34691

**Title:** V  
**Name:** GIORDANO, PETER A  
**Address:** 2636 US HIGHWAY 19  
**City-St-Zip:** HOLIDAY, FL 34691 US

I hereby 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 all other like empowered.

**SIGNATURE:** RAMONA L. GIORDANO

PRES

04/06/2012

Electronic Signature of Signing Officer or Director

Date