

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000000967

FILED
Jan 26, 2009
Secretary of State

Entity Name: SERVICEPRO LAWN AND PEST CONTROL, LLC

Current Principal Place of Business:

5805-C BRECKENRIDGE PKWY
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

2518 ANTHEM VILLAGE DRIVE
SUITE 101
HENDERSON, NV 89052

New Mailing Address:

2510 ANTHEM VILLAGE DRIVE
SUITE 110
HENDERSON, NV 89052

FEI Number: 51-0618595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILLAREAL, ADAM
150 E. WILDMERE
STE 106
LONGWOOD, FL 32750 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLE, SHANDON V
Address: 2518 ANTHEM VILLAGE DRIVE #101
City-St-Zip: HENDERSON, NV 89052

Title: MGRM () Delete
Name: NELSON, MARTIN L
Address: 2518 ANTHEM VILLAGE DRIVE #101
City-St-Zip: HENDERSON, NV 89052

Title: MGRM () Delete
Name: KARREN, THOMAS A
Address: 2518 ANTHEM VILLAGE DRIVE #101
City-St-Zip: HENDERSON, NV 89052

Title: MGRM () Delete
Name: VILLAREAL, ADAM
Address: 150 E. WILDMERE, STE 106
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: ROBINSON, GABRIEL
Address: 150 E. WILDMERE, STE 106
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COLE, SHANDON V
Address: 2510 ANTHEM VILLAGE DRIVE #110
City-St-Zip: HENDERSON, NV 89052

Title: MGRM (X) Change () Addition
Name: NELSON, MARTIN L
Address: 2510 ANTHEM VILLAGE DRIVE #110
City-St-Zip: HENDERSON, NV 89052

Title: MGRM (X) Change () Addition
Name: KARREN, THOMAS A
Address: 2510 ANTHEM VILLAGE DRIVE #110
City-St-Zip: HENDERSON, NV 89052

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARTIN NELSON

CFO

01/26/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date