FILE NOW: FILING FEE IS $61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 29, 1999 8:00 am
Secretary of State
04-29-1999 90142 013 ****70.00

0014172

DOCUMENT # N47044

1. Corporation Name

ROLLINS BEDFORD CORPORATION

Principal Place of Business	Mailing Address
500 WINDERLEY PLACE SUITE 115 MAITLAND FL 32751	500 WINDERLEY PLACE SUITE 115 MAITLAND FL 32751

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed
[21] 602 Courtland Street	[26] 602 Courtland Street	12/31/1991

Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number		Applied For
[22] Suite 200	[27] Suite 200	37-0908840		Not Applicable

City & State	City & State	5. Certifcate of Status Desired ☒	$8.75 Additional Fee Required
[23] Orlando, FL	[28] Orlando, FL		

Zip	Country	Zip	Country	6. Election Campaign Financing ☐ Trust Fund Contribution	$5.00 May Be Added to Fees
[24] 32804	[25]	[29] 32804	[30]		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
STEWART, J. DARIN 111 N ORLANDO AVE WINTER PARK FL 32789	[81] Name [82] Street Address (P.O. Box Number is Not Acceptable) [83] [84] City **FL** [85] Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

CR2E037 (11/98)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE **CD** ☐ DELETE		1.1 TITLE **VD**	☒ Change ☐ Addition
NAME **BLAIR, MARDIAN**		1.2 NAME	
STREET ADDRESS **111 N ORLANDO AVE**		1.3 STREET ADDRESS	
CITY-ST-ZIP **WINTER PARK FL 32789**		1.4 CITY-ST-ZIP	
TITLE **STD** ☐ DELETE		2.1 TITLE	☒ Change ☐ Addition
NAME **CENTER, RICHARD**		2.2 NAME	
STREET ADDRESS **3978 MEMORIAL DRIVE**		2.3 STREET ADDRESS	
CITY-ST-ZIP **DECATUR GA 32751**		2.4 CITY-ST-ZIP **30032**	
TITLE **PD** ☒ DELETE		3.1 TITLE **CD**	☐ Change ☒ Addition
NAME **CHOBAN, GLEN**		3.2 NAME Jimenez, A. David	
STREET ADDRESS **500 WINDERLEY PLACE**		3.3 STREET ADDRESS 111 N. Orlando Ave	
CITY-ST-ZIP **MAITLAND FL 32789**		3.4 CITY-ST-ZIP Winter Park, FL 32789	
TITLE **SD** ☐ DELETE		4.1 TITLE	☒ Change ☐ Addition
NAME **SKILTON, GARY**		4.2 NAME	
STREET ADDRESS **111 N ORLANDO AVE**		4.3 STREET ADDRESS	
CITY-ST-ZIP **WINTER PARK FL 30032**		4.4 CITY-ST-ZIP **32789**	
TITLE **D** ☐ DELETE		5.1 TITLE **PD**	☒ Change ☐ Addition
NAME **CAMP, VANN**		5.2 NAME	
STREET ADDRESS **500 WINDERLEY PL., SUITE 115**		5.3 STREET ADDRESS 602 Courtland Street, Suite 200	
CITY-ST-ZIP **MAITLAND FL 32751**		5.4 CITY-ST-ZIP Orlando, FL 32804	
TITLE **SVP** ☐ DELETE		6.1 TITLE	☒ Change ☐ Addition
NAME **REINER, RICH**		6.2 NAME	
STREET ADDRESS **601 EAST ROLLINS**		6.3 STREET ADDRESS	
CITY-ST-ZIP **ORLANDO FL 76028**		6.4 CITY-ST-ZIP **32803**	

14. I 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ REQUIRED 4-23-99 407-975-3000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #