

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N47044

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** ROLLINS BEDFORD CORPORATION

**Current Principal Place of Business:**

602 COURTLAND STREET  
STE 200  
ORLANDO, FL 32804

**New Principal Place of Business:**

**Current Mailing Address:**

602 COURTLAND STREET  
STE 200  
ORLANDO, FL 32804

**New Mailing Address:**

**FEI Number:** 37-0908840

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROMME, JEFF  
900 HOPE WAY  
ALTAMONTE SPRINGS, FL 32714 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: WOOD, MIKE  
Address: 900 HOPE WAY  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VPD  
Name: TRIMBLE, TAMARA L  
Address: 900 HOPE WAY  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: SD  
Name: MORCHE, PENNY  
Address: 900 HOPE WAY  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: ASD  
Name: LONG, MARCIA  
Address: 900 HOPE WAY  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TAMARA L. TRIMBLE

VPD

04/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date