

AMENDED
2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000036134

1. Entity Name

CHEMCO PEST CONTROL, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 12 AM 8:32

Principal Place of Business Mailing Address
1120 BEACH DRIVE N.E. 1120 BEACH DRIVE N.E.
ST. PETERSBURG, FL 33701 ST. PETERSBURG, FL 33701

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3639126

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PETERSON, MANDY
1120 BEACH DRIVE N.E.
ST. PETERSBURG, FL 33701

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: PTD ☐ Delete
NAME: PETERSON, MANDY
STREET ADDRESS: 1120 BEACH DRIVE N.E.
CITY-ST-ZIP: ST. PETERSBURG, FL 33701

TITLE: PSTD ☒ Change ☐ Addition
NAME: PETERSON, MANDY
STREET ADDRESS: 1120 BEACH DRIVE N.E.
CITY-ST-ZIP: ST. PETERSBURG, FL 33701

TITLE: SD ☒ Delete
NAME: KING, STEVEN A.
STREET ADDRESS: 1120 BEACH DRIVE N.E.
CITY-ST-ZIP: ST. PETERSBURG, FL 33701

TITLE: ☐ Change ☐ Addition
NAME: 300004638473--8
STREET ADDRESS: -10/16/01--01038--017
CITY-ST-ZIP: *****26.25 *****26.25

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME: 300004638473--8
STREET ADDRESS: -10/16/01--01038--018
CITY-ST-ZIP: *****35.00 *****35.00

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

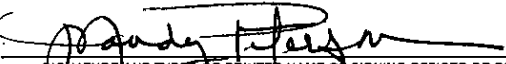
TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

13. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 
MANDY PETERSON, AS PRESIDENT

May 31, 2001 (727)827-3326

Date

Daytime Phone #

CR2E034 (11/00)