

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2004 8:00 am
Secretary of State

02-06-2004 90032 012 ***150.00

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1. Entity Name

A-1 TERMITE & PEST CONTROL OF FLORIDA INC.



Principal Place of Business

1840 HWY 44 W
INVERNESS FL 34453

Mailing Address

1840 HWY 44 W
INVERNESS FL 34453

2. Principal Place of Business

1840 Hwy 44 W

Suite, Apt. #, etc.

3. Mailing Address

1840 Hwy 44 W

Suite, Apt. #, etc.

City & State

Inverness, FL

City & State

Inverness, FL

Zip

34453

Country

Citrus

Zip

34453

Country

Citrus

4. FEI Number

59-3654425

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHLUMBERGER, ROBERT
6220 W. CORPORATE OAKS DR.
CRYSTAL RIVER FL 34429

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004: Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME ALFORD, BERNIE R SR.
STREET ADDRESS 2097 FOREST DR.
CITY-ST-ZIP INVERNESS FL 34453

TITLE D ☐ Delete
NAME ALFORD, INGRID
STREET ADDRESS 2097 FOREST DR.
CITY-ST-ZIP INVERNESS FL 34453

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6825 E Red Robin Ln
CITY-ST-ZIP Inverness, FL 34452

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6825 E. Red Robin Ln.
CITY-ST-ZIP Inverness, FL 34452

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ingrid Alford Ingrid Alford

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/4/04 352-726-5363

Date

Daytime Phone #