

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000066852

1. Entity Name

FIRST FLORIDA PEST CONTROL, INC.

Principal Place of Business  
1403 VALLEY PINE CIRCLE  
APOPKA FL 32712

Mailing Address  
1403 VALLEY PINE CIRCLE  
APOPKA FL 32712

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3730112

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MILLER, GEOFFREY M  
1403 VALLEY PINE CIRCLE  
APOPKA FL 32712

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

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSD  
MILLER, GEOFFREY M  
1403 VALLEY PINE CIRCLE  
APOPKA FL 32712 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VTD  
MILLER, CONNIE S  
1403 VALLEY PINE CIRCLE  
APOPKA FL 32712 ☐ Delete

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

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED**  
**Aug 25, 2002 8:00 am**  
**Secretary of State**

08-12-2002 90007 036 \*\*\*150.00

42080

DO NOT WRITE IN THIS SPACE

CR2E034 (4/02)

*Attachment*  
**Brummer & Rogers, P.A.**

Certified Public Accountants

Frederick C. Brummer, C.P.A.  
Craig A. Rogers, C.P.A.

42080 [REDACTED]  
#PO1000066852

246 South Park Avenue  
P.O. Box 758  
Apopka, Florida 32704-0758  
(407) 886-4522  
(407) 886-4560 Fax

August 6, 2002

Division of Corporations  
Uniform Business Reports Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: First Florida Pest Control, Inc., FEI number 59-3730112, Uniform Business Report 2002.

Enclosed is the 2002 Uniform Business Report for the above referenced corporation. We believe that mail delivery was disrupted.

Enclosed is a check in the amount of \$150. Since the taxpayer did not willfully neglect to file the 2002 Uniform Business Report, we respectfully request that you accept the \$150 as payment in full. If you have any questions, please feel free to contact our office

Sincerely,

*Frederick C. Brummer*

Frederick C. Brummer