2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2006
Secretary of State

DOCUMENT# P01000069666

Entity Name: YOUR XTERMINATORS SERVICES, INC.

Current Principal Place of Business:

5 MARKET PLACE CT.
UNIT #3
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 353923
PALM COAST, FL 321353923

New Mailing Address:

FEI Number: 59-3732001 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FARRELL, SCOTT C
25 FELTON LN
PALM COAST, FL 32137 US

Name and Address of New Registered Agent:

FARRELL, SCOTT C
7 FLANDERS LANE
PALM COAST, FL 32137 US

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: SCOTT C FARRELL 04/19/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FARRELL, SCOTT C
Address: P.O. BOX 351963
City-St-Zip: PALM COAST, FL 321351963

Title: D ( ) Delete
Name: FARRELL, PATRICIA L
Address: P.O. BOX 351963
City-St-Zip: PALM COAST, FL 321351963

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SCOTT C FARRELL PRES 04/19/2006
Electronic Signature of Signing Officer or Director Date