2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# P01000108313

Entity Name: GREAT-FULLY DEAD PEST MANAGEMENT, INC.

Current Principal Place of Business:

655 40TH AVENUE
VERO BEACH, FL 32968

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 650781
VERO BEACH, FL 32965

New Mailing Address:

FEI Number: 65-1152989 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GABRIEL, ALAN L ESQ.
2699 SOUTH BAYSHORE DRIVE
SUITE 700
MIAMI, FL 33133 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: BARTLEY, JAMES
Address: 102 DOE TRAIL
City-St-Zip: JUPITER, FL 33458

Title: VSD ( ) Delete
Name: FLANAGAN, MARY F
Address: 1802 23RD AVENUE
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VSD (X) Change ( ) Addition
Name: FLANAGAN, MARY F
Address: 655 40TH AVENUE
City-St-Zip: VERO BEACH, FL 32968

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARY F. FLANAGAN VSD 04/25/2005

Electronic Signature of Signing Officer or Director — Date