

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035946

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: ROBINSON PEST MANAGEMENT, INC.

## Current Principal Place of Business:

3860 CURTIS BOULEVARD  
SUITE, 634  
COCOA, FL 32927

## New Principal Place of Business:

7215 WHITNEY AVE  
COCOA, FL 32927

## Current Mailing Address:

7215 WHITNEY AVENUE  
COCOA, FL 32927

## New Mailing Address:

115 TYLER WILL DRIVE  
HARVEST, AL 35749

FEI Number: 75-3025265

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBINSON, ROBBY  
7215 WHITNEY AVENUE  
COCOA, FL 32927 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: ROBINSON, ROBBY C  
Address: 3860 CURTIS BOULEVARD, SUITE, 634  
City-St-Zip: COCOA, FL 32927

Title: SVD ( ) Delete  
Name: ROBINSON, CHRISTIE L  
Address: 3860 CURTIS BOULEVARD, SUITE, 634  
City-St-Zip: COCOA, FL 32927

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: ROBINSON, ROBBY C  
Address: 115 TYLER WILL DRIVE  
City-St-Zip: HARVEST, AL 35749

Title: SVD (X) Change ( ) Addition  
Name: ROBINSON, CHRISTIE L  
Address: 115 TYLER WILL DRIVE  
City-St-Zip: HARVEST, AL 35749

I hereby certify that the information supplied with this filing does not qualify 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: ROBBY ROBINSON

PTD

04/29/2009

Electronic Signature of Signing Officer or Director

Date