

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000046481

FILED
Apr 29, 2006
Secretary of State

Entity Name: ANGUS TERMITE & PEST CONTROL INC.

Current Principal Place of Business:

4125 SW MARTIN HIGHWAY
SUITE 6
PALM CITY, FL 34990

New Principal Place of Business:

Current Mailing Address:

3485 SW SUNSET TRACE CIR.
PALM CITY, FL 34990

New Mailing Address:

P.O. BOX 681
PALM CITY, FL 34991

FEI Number: 03-0434858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSLEY, SHAWN C
3485 SW SUNSET TRACE CIR.
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

MOSLEY, SHAWN C
10751 SW. WEST PARK AVE.
PORT SAINT LUCIE, FL 34987 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: _____

Electronic Signature of Registered Agent

04/29/2006

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MOSLEY, SHAWN C
Address: 3485 SW. SUNSET TRACE CIR.
City-St-Zip: PALM CITY, FL 34990

Title: V () Delete
Name: MOSLEY, JENNIFER J
Address: 3485 SW. SUNSET TRACE CIR.
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MOSLEY, SHAWN C
Address: 10751 SW. WEST PARK AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34987

Title: V (X) Change () Addition
Name: MOSLEY, JENNIFER J
Address: 10751 SW WEST PARK AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34987

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: SHAWN MOSLEY

Electronic Signature of Signing Officer or Director

P

04/29/2006

Date