

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000051859

FILED
Apr 28, 2004
Secretary of State

Entity Name: ASPEN PEST CONTROL, INC.

Current Principal Place of Business:

7 NW COLE TERRACE
RT. 20 BOX 2135
LAKE CITY, FL 32055

New Principal Place of Business:

301 N.W. COLE TERRACE
LAKE CITY, FL 32055

Current Mailing Address:

RT. 20 BOX 2135
LAKE CITY, FL 32055

New Mailing Address:

301 N.W. COLE TERRACE
LAKE CITY, FL 32055

FEI Number: 75-3058541

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREGORY, SHANNON
7 NW COLE TERRACE
RT. 20 BOX 2135
LAKE CITY, FL 32055 US

Name and Address of New Registered Agent:

GREGORY, SHANNON
301 NW COLE TERRACE
LAKE CITY, FL 32055 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

04/28/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GREGORY, SHANNON
Address: RT. 20 BOX 2135
City-St-Zip: LAKE CITY, FL 32055

Title: V () Delete
Name: LINTON, MICAH
Address: RT. 20 BOX 2135
City-St-Zip: LAKE CITY, FL 32055

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GREGORY, SHANNON
Address: P.O. BOX 2545
City-St-Zip: LAKE CITY, FL 32056

Title: V (X) Change () Addition
Name: LINTON, MICAH
Address: 301 N.W. COLE TERRACE
City-St-Zip: LAKE CITY, FL 32055

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: SHANNON GREGORY

Electronic Signature of Signing Officer or Director

P

04/28/2004

Date