

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015786

Entity Name: D.W. PEST CONTROL, INC.

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

13618 NW 270TH AVE.
ALACHUA, FL 32615

New Principal Place of Business:

Current Mailing Address:

13618 NW 270TH AVE.
ALACHUA, FL 32615

New Mailing Address:

FEI Number: 51-0446426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDING, DUSTIN B
13618 NW 270TH AVE.
ALACHUA, FL 32615 US

Name and Address of New Registered Agent:

WALDING, AMY C
13618 NW 270TH AVE.
ALACHUA, FL 32615 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: AMY C WALDING

01/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WALDING, DUSTIN
Address: 13618 NW 270TH AVE
City-St-Zip: ALACHUA, FL 32615

Title: V () Delete
Name: JOHNSON, JOHN
Address: 13618 NW 270TH AVE
City-St-Zip: ALACHUA, FL 32615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: JOHNSON, JOHN
Address: 7606 NW 258TH AVE.
City-St-Zip: ALACHUA, FL 32615

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: DUSTIN WALDING

P

01/08/2009

Electronic Signature of Signing Officer or Director

Date