2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P03000060181

Entity Name: TRI-STATE TERMITE & PEST SERVICES, INC.

Current Principal Place of Business:

515 JOHN KNOX RD
SUITE 109
TALLAHASSEE, FL 32303

New Principal Place of Business:

1530 METROPOLITAN BLVD.
SUITE 207
TALLAHASSEE, FL 32308

Current Mailing Address:

515 JOHN KNOX RD
SUITE 109
TALLAHASSEE, FL 32303

New Mailing Address:

1530 METROPOLITAN BLVD.
SUITE 207
TALLAHASSEE, FL 32308

FEI Number: 26-1478231 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILHELMI, RONALD
5104 TOURAINE DR
TALLAHASSEE, FL 32308 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: P ( ) Delete
Name: WILHELMI, RONALD
Address: 5104 TOURAINE DR
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: V ( ) Delete
Name: WILHELMI, TERRY
Address: 5104 TOURAINE DR
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: S ( ) Delete
Name: DOBBINS, DAMON
Address: 2307 CUMBERLAND DR
City-St-Zip: TALLAHASSEE, FL 32303

Title: T ( ) Delete
Name: DOBBINS, KILEY
Address: 2737 LEARY LANE
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: RONALD WILHELMI P 04/30/2008

Electronic Signature of Signing Officer or Director — Date