

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000098163

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** PEST KING PEST CONTROL SERVICES, INC.

**Current Principal Place of Business:**

30926 SAFFRON AVE  
EUSTIS, FL 32736 US

**New Principal Place of Business:**

**Current Mailing Address:**

30926 SAFFRON AVE  
EUSTIS, FL 32736 US

**New Mailing Address:**

PO BOX 957  
SORRENTO, FL 32776 US

**FEI Number:** 20-0236580

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEVIN, PATTI EA  
1250 MT HOMER RD  
SUITE 3  
EUSTIS, FL 32726 US

**Name and Address of New Registered Agent:**

LEVIN, PATTI EA  
1250 MT HOMER RD  
SUITE 8  
EUSTIS, FL 32726 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

05/01/2012

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KING, REX  
Address: 30926 SAFFRON AVE  
City-St-Zip: EUSTIS, FL 32736 US

I hereby 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 all other like empowered.

SIGNATURE: REX KING

P

05/01/2012

Electronic Signature of Signing Officer or Director

Date