

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000029386

FILED  
Mar 20, 2009  
Secretary of State

Entity Name: STILSON PEST CONTROL, INC.

## Current Principal Place of Business:

29200 ALABAMA RD  
LEISURE, FL 33033

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 901696  
LEISURE, FL 33090

## New Mailing Address:

FEI Number: 20-0730464

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

COHEN-BRUSH, CELINE  
20704 SW 103 PLACE  
MIAMI, FL 33189 US

## Name and Address of New Registered Agent:

COHEN, CELINE K  
20704 SW 103 PLACE  
MIAMI, FL 33189 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: CELINE COHEN

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: COHEN-BRUSH, CELINE  
Address: 20704 SW 103 PALCE  
City-St-Zip: MIAMI, FL 33189

Title: SEC ( ) Delete  
Name: BRUSH, DOUGLAS  
Address: 29200 ALABAMA RD  
City-St-Zip: HOMESTEAD, FL 33033

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: COHEN, CELINE  
Address: 20704 SW 103 PALCE  
City-St-Zip: MIAMI, FL 33189

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: CELINE COHEN

PRES

03/20/2009

Electronic Signature of Signing Officer or Director

Date