

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000035811

FILED
Mar 16, 2005
Secretary of State

Entity Name: TARGET PEST MANAGEMENT, INC.

Current Principal Place of Business:

74 WAYNEL CIRCLE S.E.
FT. WALTON BEACH, FL 32548 US

New Principal Place of Business:

615 MASSACHUETTS AVENUE
FT. WALTON BEACH, FL 32547 US

Current Mailing Address:

74 WAYNEL CIRCLE S.E.
FT. WALTON BEACH, FL 32548 US

New Mailing Address:

PO BOX 1448
FT. WALTON BEACH, FL 32549 US

FEI Number: 20-0809925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHAEFER, ERIC J
74 WAYNEL CIRCLE S.E.
FT. WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

CREDILLE, ANTHONY A
615 MASSACHUSETTS AVENUE
FT. WALTON BEACH, FL 32547 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: ANTHONY A. CREDILLE

03/16/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P D () Delete
Name: CREDILLE, ANTHONY A
Address: 615 MASSACHUSETTS AVE.
City-St-Zip: FT. WALTON BEACH, FL 32547 US

Title: VP D () Delete
Name: SCHAEFER, ERIC J
Address: 74 WAYNEL CIRCLE S.E.
City-St-Zip: FT. WALTON BEACH, FL 32548 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP D (X) Change () Addition
Name: CREDILLE, STANLEY W
Address: 615 MASSACHUSETTS AVENUE
City-St-Zip: FT. WALTON BEACH, FL 32547 US

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: ANTHONY A. CREDILLE

P D

03/16/2005

Electronic Signature of Signing Officer or Director

Date