

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037272

FILED  
May 19, 2009  
Secretary of State

**Entity Name:** PORT CITY PEST CONTROL OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

5901 WEST BEAVER STREET  
JACKSONVILLE, FL 32254 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6516  
JACKSONVILLE, FL 32236 US

**New Mailing Address:**

**FEI Number:** 30-0164213      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

BARTMESS, DAVID W  
1581 MARBLE LAKE DRIVE  
JACKSONVILLE, FL 32221 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P/D ( ) Delete  
Name: BARTMESS, DAVID W  
Address: 1581 MARBLE LAKE DRIVE  
City-St-Zip: JACKSONVILLE, FL 32221 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: DAVID W. BARTMESS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P/D

05/19/2009

\_\_\_\_\_  
Date