## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062423

Entity Name: SUN COAST PEST MANAGEMENT, INC.

**FILED** Apr 28, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

124 SILVER BELL CRESCENT 1601 S.E. AVENUE K PLACE ROYAL PALM BEACH, FL 33411 BELLE GLADE, FL 33430

**Current Mailing Address: New Mailing Address:** 

1601 S.E. AVENUE K PLACE 124 SILVER BELL CRESCENT ROYAL PALM BEACH, FL 33411 BELLE GLADE, FL 33430

FEI Number: 72-1582132 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GARCIA, KELLI W GARCIA, KELLI W 124 SILVER BELL CRESCENT 1601 S.E. AVENUE K PLACE US ROYAL PALM BEACH, FL 33411 BELLE GLADE, FL 33430

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: KELLI W. GARCIA 04/28/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete

GARCIA, MARIO Name: 124 SILVER BELL CRESCENT Address:

City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: () Delete Name: GARCIA. KELLI W

124 SILVER BELL CRESCENT Address: ROYAL PALM BEACH, FL 33411 City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition

GARCIA, MARIO Name:

1601 S.E. AVENUE K PLACE Address: City-St-Zip: BELLE GLADE, FL 33430

Title: (X) Change ( ) Addition

Name: GARCIA, KELLI W

Address: 1601 S.E. AVENUE K PLACE BELLE GLADE, FL 33430 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: MARIO GARCIA D 04/28/2008