

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90044 020 ***558.75

DOCUMENT # P04761

1. Entity Name

TRULY NOLEN EXTERMINATING, INC.

Principal Place of Business

Mailing Address

**3620 EAST SPEEDWAY
 TUCSON AZ 85716**

**PO BOX 43550
 TUCSON AZ 85733-3550
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

86-0169166

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
 NAME **VP SHOOB, JUDITH A**
 STREET ADDRESS **126 N SCOTTSDALE RD #11**
 CITY-ST-ZIP **TEMPE AZ 85281**

TITLE Change Addition
 NAME **TREASURER ARNIE KAPLAN**
 STREET ADDRESS **3620 E SPEEDWAY, TUCSON, AZ 85716**
 CITY-ST-ZIP **3620 E SPEEDWAY, TUCSON, AZ 85716**

TITLE Delete
 NAME **VP GREENHALGH, STEVE**
 STREET ADDRESS **3851 BASELINE RD, #234 A & B**
 CITY-ST-ZIP **GILBERT AZ**

TITLE Change Addition
 NAME **Chairman TRULY D. NOLEN**
 STREET ADDRESS **1170 THIRD ST. S, #C-205, NAPLES, FL 34102**
 CITY-ST-ZIP **1170 THIRD ST. S, #C-205, NAPLES, FL 34102**

TITLE Delete
 NAME **P SCOTT NOLEN**
 STREET ADDRESS **234 N. ORANGE BLOSSOM TRAIL**
 CITY-ST-ZIP **ORLANDO FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VP HARTLEY ROBERT W.**
 STREET ADDRESS **3620 E. SPEEDWAY**
 CITY-ST-ZIP **TUCSON AZ**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DS NOLEN, TRULY WILLIAM**
 STREET ADDRESS **3620 EAST SPEEDWAY**
 CITY-ST-ZIP **TUCSON AZ**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VP RON DESEAR**
 STREET ADDRESS **2525 WHITFIELD INDUSTRIAL WAY**
 CITY-ST-ZIP **SARASOTA FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert W. Hartley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/8/00
 Date

(520) 546-9132
 Daytime Phone #

CR2E034 (9/99)