

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000072998

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** BUG COPS PEST CONTROL, INC

**Current Principal Place of Business:**

1098 N C.R. 315  
MELROSE, FL 32666

**New Principal Place of Business:**

**Current Mailing Address:**

1098 N C.R. 315  
MELROSE, FL 32666

**New Mailing Address:**

**FEI Number:** 20-2855344

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HATTON, ROBERT W III  
1098 N CR 315  
MELROSE, FL 32666 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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: HATTON, ROBERT W III  
Address: 1098 N CR 315  
City-St-Zip: MELROSE, FL 32666

Title: VP  
Name: LETO, MICHAEL J  
Address: 3913A LITTLE DAIRY ROAD  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

I hereby 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 all other like empowered.

SIGNATURE: ROBERT HATTON

PRES

01/06/2011

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

\_\_\_\_\_  
Date