

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000158743

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

**Entity Name:** SAFARI PEST MANAGEMENT SERVICE CO.

**Current Principal Place of Business:**

650 MADELINE DRIVE  
WEST PALM BEACH, FL 33413 US

**New Principal Place of Business:**

**Current Mailing Address:**

650 MADELINE DRIVE  
WEST PALM BEACH, FL 33413 US

**New Mailing Address:**

**FEI Number:** 20-4044208

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ENGLISH, DAVID R PRES.  
650 MADELINE DRIVE  
WEST PALM BEACH, FL 33413 US

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

ENGLISH, DAVID R PRES.  
650 MADELINE DRIVE  
WEST PALM BEACH, FL 33413 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: DAVID R ENGLISH

01/17/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ENGLISH, DAVID R PRES.  
Address: 650 MADELINE DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33413

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: DAVID R ENGLISH

PRES

01/17/2012

Electronic Signature of Signing Officer or Director

Date