

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000048010

FILED
Jul 03, 2007
Secretary of State

Entity Name: PRO QUEST PEST CONTROL OF JACKSONVILLE INC.

Current Principal Place of Business:

6254 POWERS AVE UNIT 73
JACKSONVILLE, FL 32217

New Principal Place of Business:

6254 POWERS AVE UNIT 720
JACKSONVILLE, FL 32217

Current Mailing Address:

6254 POWERS AVE UNIT 73
JACKSONVILLE, FL 32217

New Mailing Address:

6254 POWERS AVE UNIT 720
JACKSONVILLE, FL 32217

FEI Number: 83-0453876

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SWEIKATA, GLEN
12449 JEREMY'S LANDING CT
JACKSONVILLE, FL 32258 US

Name and Address of New Registered Agent:

SWEIKATA, GLEN
6254 POWERS AVE UNIT 720
JACKSONVILLE, FL 32217 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: GLEN SWEIKATA

07/03/2007

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 () Delete
Name: SWEIKATA, GLEN
Address: 12449 JEREMY'S LANDING CT
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: HAMILTON, SCOTT
Address: 12449 JEREMY'S LANDING CT
City-St-Zip: JACKSONVILLE, FL 32258

Title: D () Delete
Name: CONWAY, SANDRA
Address: 11470 VIVALIA CT
City-St-Zip: JACKSONVILLE, FL 32223

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SWEIKATA, GLEN
Address: 6254 POWERS AVE UNIT 720
City-St-Zip: JACKSONVILLE, FL 32217

Title: D (X) Change () Addition
Name: HAMILTON, SCOTT
Address: 6254 POWERS AVE UNIT 720
City-St-Zip: JACKSONVILLE, FL 32217

Title: D (X) Change () Addition
Name: CONWAY, SANDRA
Address: 4416 HABANA AVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: D () Change (X) Addition
Name: HAMILTON, FRED
Address: 8157 WINDOVER WAY
City-St-Zip: TITUSVILLE, FL 32780

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: GLEN SWEIKATA

D

07/03/2007

Electronic Signature of Signing Officer or Director

Date