

# **2011 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P10000038427

**FILED**  
**May 13, 2011**  
**Secretary of State**

**Entity Name:** PURE PEST MANAGEMENT, INC.

**Current Principal Place of Business:**

523 18TH STREET  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

523 18TH STREET  
ORLANDO, FL 32805

**New Mailing Address:**

**FEI Number:** 27-2502573

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KRINKER, DAVID  
119 WHITECAPS CIRCLE  
MAITLAND, FL 32751 US

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

STAGNER, CHARLES  
1136 S PENNSYLVANIA AVENUE  
WINTER PARK, FL 32789 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: CHARLES STAGNER

05/13/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NEEL, GLENN  
Address: 118 WHITECAPS CIRCLE  
City-St-Zip: MAITLAND, FL 32751

Title: CEO  
Name: STAGNER, CHARLES  
Address: 1136 S PENNSYLVANIA AVENUE  
City-St-Zip: WINTER PARK, FL 32789

Title: S  
Name: NEEL, BLANCHE  
Address: 118 WHITECAPS CIRCLE  
City-St-Zip: MAITLAND, FL 32751

Title: VP  
Name: HAMANN, LYNDON  
Address: 5416 SATIN LEAF COURT  
City-St-Zip: SANFORD, FL 32771

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: GLENN NEEL

PRES

05/13/2011

Electronic Signature of Signing Officer or Director

Date