2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Secretary of State DOCUMENT # P26111 1. Entity Name 03-23-2005 90028 011 ***150.00 RENTOKIL, INC.-PEST CONTROL SERVICES Principal Place of Business Mailing Address 4067 INDUSTRIAL PARK DRIVE NORCROSS GA 30071 4067 INDUSTRIAL PARK DRIVE NORCROSS GA 30071 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 58-1820115 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TIT1 F □ Change Addition Delete REBISA, ROBB NAME NAME 4067 INDUSTRIAL PARK DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP NORCROSS GA 30071 CITY-ST-ZIP **✓** Delete tresident ☐ Addition EVIN M. WARD NAME LONGFELLOW, DOUGLAS J NAME 4067-INDUSTRIAL-PARK DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP NORCROSS GA-30071 CITY-ST-7iP Change TITLE _ Defete TITLE ☐ Addition HUBBARD, DEBRA NAME NAME STREET ADDRESS 4067 INDUSTRIAL PARK DRIVE STREET ADDRESS CITY-ST-ZIP NORCROSS GA 30071 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition KAMZELSKI, PAUL NAME NAME 1501 REEDSDALE ST, SUITE 501 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PITTSBURGH PA 15233 CITY-ST-ZIP TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

FILED

Mar 23, 2005 8:00 am

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. ebeaM. Hubbard 3/8/03

CITY-ST-ZIP 12. Thereby 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

CITY-ST-7IP