

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Norr
Secretary of State
Tallahassee, Florida 32399-0400

APPROVED
AND
FILED

30 MAY -1 AM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P40472** (3)

1. Corporation Name

ROLLINS TECHNICAL SERVICES CO.

Principal Place of Business

**123 NORTH WACKER DRIVE
CHICAGO IL 60606**

Mailing Address

**123 NORTH WACKER DRIVE
CHICAGO IL 60606**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/08/1992

3a. Date of Last Report
05/01/1994

4. FEI Number
36-3617072

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.017,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

22

City & State

23

24

Principal Place of Bus./Mailing Address
**123 North Wacker Drive, 26th Fl.
Chicago, Illinois 60606
County: COOK**

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0605, Florida Statutes.

SIGNATURE

Signature of Agent

Signature of Registered Agent

Date

12. OFFICERS AND DIRECTORS

01
NAME
STREET ADDRESS
CITY, ST, ZIP

**P
WADE, ROGER
123 N. WACKER DRIVE
CHICAGO IL**

02
NAME
STREET ADDRESS
CITY, ST, ZIP

**V
STAPLETON, JANE
111 E. WACKER DRIVE
CHICAGO IL**

03
NAME
STREET ADDRESS
CITY, ST, ZIP

**V
STRENK, FRANK
111 E. WACKER DRIVE
CHICAGO IL**

04
NAME
STREET ADDRESS
CITY, ST, ZIP

**S
JESCHKE, ARLENE
123 N. WACKER DRIVE
CHICAGO IL**

05
NAME
STREET ADDRESS
CITY, ST, ZIP

**AV
GROB, ROBERT
500 WASHINGTON AVE.
CHICAGO IL**

06
NAME
STREET ADDRESS
CITY, ST, ZIP

**VAS
HANNER, JEROME S.
123 N. WACKER DRIVE
CHICAGO IL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

01 NAME
02 NAME
03 STREET ADDRESS
04 CITY, ST, ZIP

☐ Change ☐ Addition

05 NAME
06 NAME
07 STREET ADDRESS
08 CITY, ST, ZIP

☐ Change ☐ Addition

09 NAME
10 NAME
11 STREET ADDRESS
12 CITY, ST, ZIP

☐ Change ☐ Addition

13 NAME
14 NAME
15 STREET ADDRESS
16 CITY, ST, ZIP

☐ Change ☐ Addition

17 NAME
18 NAME
19 STREET ADDRESS
20 CITY, ST, ZIP

☐ Change ☐ Addition

21 NAME
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.017(1)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual 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 this corporation or this is an annual report or supplementary annual report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on any other report with an addition.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Grob ROBERT GROB

4/26/95

312-701-3978