## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

## May 04, 2006 8:00 am Secretary of State DOCUMENT # P92000003479 05-04-2006 90218 036 \*\*\*150.00 1. Entity Name ABC FUMIGATION CO. Principal Place of Business Mailing Address 1880-1/2 S. HUNTINGTON LANE 1880-1/2 S. HUNTINGTON LANE ROCKLEDGE FL 32955 **ROCKLEDGE FL 32955** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/05) City & State Applied For City & State 4. FEI Number 59-3151715 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 honda V. OTIS GUY Street Address (P.O. Box Number is Not Acceptable) 1880 1/2 S HUNTINGTON LANE SUITE A **ROCKLEDGE FL 32955** 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. Morrola SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Regislered Agent signature required when reinstaling) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2006 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. Change ☐ Addition TITLE TITLE Delete GUY, V. OTIS NAME NAME 1/2-STREET ADDRESS 1880-1/2 S. HUNTINGTON LANE STREET ADDRESS 1880 CITY-ST-ZIP ROCKLEDGE FL 32955 CITY-ST-ZIP TITLE Delete 🕽 TITLE Change Addition NAME GUY, FRED M NAME STREET ADDRESS STREET ADDRESS 1880-1/2 S. HUNTINGTON LANE CITY-ST-ZIP ROCKLEDGE FL 32955 CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition DS ☐ Detete NAMÉ NAME CHANDLER, RHONDA L STREET ADDRESS STREET ADDRESS 1880-1/2 S. HUNTINGTON LANE CITY-ST-7IP CITY-ST-ZIP **ROCKLEDGE FL 32955** DT Change TITLE ☐ Defete TITLE Addition GUY, CHRIS S NAME NAME STREET ADDRESS 1880-1/2 S. HUNTINGTON LANE STREET ADDRESS CITY-ST-ZIP **ROCKLEDGE FL 32955** CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Delete ☐ Change Addition TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes, I further certify that the information 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

**FILED**