

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000037444

FILED
Apr 27, 2011
Secretary of State

Entity Name: ATTACK PEST MANAGEMENT, INC.

Current Principal Place of Business:

311 ALTAMONTE COMMERCIAL BLVD
SUITE 1618
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

311 ALTAMONTE COMMERCIAL BLVD
SUITE 1618
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 59-3197833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIGHTNER, TIM M
311 ALTAMONTE COMMERCIAL BLVD
SUITE 1618
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT
Name: LIGHTNER, TIM
Address: 311 ALTAMONTE COMMERCIAL BLVD STE 1618
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DVP
Name: LIGHTNER, DARLA
Address: 311 ALTAMONTE COMMERCIAL BLVD STE 1618
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: TIM LIGHTNER

PRES

04/27/2011

Electronic Signature of Signing Officer or Director

Date