

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000081650

Entity Name: DOLLAR PEST CONTROL, INC.

FILED  
Jan 15, 2008  
Secretary of State

## Current Principal Place of Business:

620 N. SAVARY AVE.  
LECANTO, FL 34453 US

## New Principal Place of Business:

598 S. WOLFE POINT  
LECANTO, FL 34460 US

## Current Mailing Address:

P.O.BOX 906  
LECANTO, FL 34460 US

## New Mailing Address:

FEI Number: 59-3212385      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROTEN, DICK  
620 N SAVARY AVE  
INVERNESS, FL 34453 US

## Name and Address of New Registered Agent:

ROTEN, DICK  
598 SO WOLFE POINT  
LECANTO, FL 34460 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: \_\_\_\_\_

01/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ROTEN, DICK  
Address: 620 N. SAVARY AVE.  
City-St-Zip: INVERNESS, FL 34453

Title: VP ( ) Delete  
Name: ROTEN, DICK  
Address: 594 S WOLFE POINT  
City-St-Zip: LECANTO, FL 34461

Title: T ( ) Delete  
Name: ROTEN, DICK  
Address: 594 SOUTH WOLFE POINT  
City-St-Zip: LECANTO, FL 34461

Title: S ( ) Delete  
Name: ROTEN, DICK  
Address: 594 SOUTH WOLFE POINT  
City-St-Zip: LECANTO, FL 34461

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ROTEN, DICK  
Address: 598 S WOLFE POINT  
City-St-Zip: LECANTO, FL 34460

Title: VP (X) Change ( ) Addition  
Name: ROTEN, DICK  
Address: 598 S. WOLFE POPINT  
City-St-Zip: LECANTO, FL 34461

Title: T (X) Change ( ) Addition  
Name: ROTEN, DICK  
Address: 598 SOUTH WOLFE POINT  
City-St-Zip: LECANTO, FL 34461

Title: S (X) Change ( ) Addition  
Name: ROTEN, DICK  
Address: 598 SOUTH WOLFE POINT  
City-St-Zip: LECANTO, FL 34461

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DICK ROTEN

PRES

01/15/2008

Electronic Signature of Signing Officer or Director

Date