

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000028379

FILED
Jan 14, 2005
Secretary of State

Entity Name: SAFEWAY TERMITE AND PEST CONTROL CORPORATION

Current Principal Place of Business:

4722 W LAUREL ROAD
TAMPA, FL 336298210 US

New Principal Place of Business:

2780 N RIVERSIDE DRIVE
SUITE 805
TAMPA, FL 336021000 US

Current Mailing Address:

P.O. BOX 320831
TAMPA, FL 336292831 US

New Mailing Address:

2780 N RIVERSIDE DRIVE
SUITE 805
TAMPA, FL 336021000 US

FEI Number: 65-0500955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAWS, JIMMY R
4722 WEST LAUREL RD.
TAMPA, FL 336298210 US

Name and Address of New Registered Agent:

HAWS, JIMMY R
2780 N RIVERSIDE DRIVE
SUITE 805
TAMPA, FL 336021000 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: JIMMY R HAWS

01/14/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: MACALUSO, RICHARD A
Address: 4847 BASSWOOD
City-St-Zip: LAND O'LAKES, FL 34639

Title: PSTD () Delete
Name: HAWS, JIMMY
Address: 4722 W LAUREL ROAD
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: HAWS, JIMMY
Address: 2780 N RIVERSIDE DRIVE, SUITE 805
City-St-Zip: TAMPA, FL 336021000 US

Title: V (X) Change () Addition
Name: SCHAIBLY, ANDREW J
Address: 31409 SHAKER CIRCLE
City-St-Zip: WESLEY CHAPEL, FL 33543 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JIMMY R HAWS

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01/14/2005

Electronic Signature of Signing Officer or Director

Date