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**Apr 07 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000002514 (4)

1. Corporation Name
PRO PEST, INC.



Principal Place of Business Mailing Address
**1881 TRADE CENTER WAY
NAPLES FL 33942** **1881 TRADE CENTER WAY
NAPLES FL 34109-1863**

3. Date Incorporated or Qualified 01/09/1995	3a. Date of Last Report 04/28/1996
4. FEI Number 65-0543683	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent
**WARNER, PATRICK E
205 AIRPORT ROAD, SOUTH
NAPLES FL 33942**

10. Name and Address of New Registered Agent

81. Name Marlene Warner
82. Street Address (P.O. Box Number is Not Acceptable) 5564 Wilmar Lane
83. City & State Naples FL 34112
84. City Naples FL 34112
85. Zip Code FL 34112

11. Pursuant to the provisions of Sections 607.0502 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 607.0505, Florida Statutes.

SIGNATURE: *Marlene Warner* DATE: **3/25/97**

12. OFFICERS AND DIRECTORS

TITLE	ST	<input type="checkbox"/> DELETE
NAME	WARNER, PATRICK E	
STREET ADDRESS	5564 WILMAR LANE	
CITY - ST - ZIP	NAPLES FL 33962	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	KAISER, DAVID F JR.	
STREET ADDRESS	2098 44TH TERRACE, SW	
CITY - ST - ZIP	NAPLES FL 33969	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	GRANT, RONALD R	
STREET ADDRESS	410 12TH STREET, NE	
CITY - ST - ZIP	NAPLES FL 33964	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Patrick Warner	
1.3 STREET ADDRESS	5564 Wilmar Lane	
1.4 CITY - ST - ZIP	Naples FL 34112	
2.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	DELETE DAVID F. KAISER	
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	DELETE RONALD R. GRANT	
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Vice President, Sec, Treas	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Marlene Warner	
4.3 STREET ADDRESS	5564 Wilmar Lane	
4.4 CITY - ST - ZIP	Naples FL 34112	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the 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 12 or Block 13 and changed, with an attachment with an address.

SIGNATURE: *Marlene Warner* DATE: **2/27/97** Daytime Phone #: **941 592 1616**

CR2E034 (9/96)