

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000012398

FILED  
Apr 22, 2004  
Secretary of State

Entity Name: ROYAL PEST SERVICES, INC.

## Current Principal Place of Business:

7011 BUSINESS PARK BOULEVARD NORTH  
102  
JACKSONVILLE, FL 32256 US

## New Principal Place of Business:

## Current Mailing Address:

7011 BUSINESS PARK BOULEVARD NORTH  
102  
JACKSONVILLE, FL 32256 US

## New Mailing Address:

FEI Number: 59-3295970      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HARRINGTON, JAMES G  
7011 BUSINESS PARK BLVD. N  
SUITE 102  
JACKSONVILLE, FL 32256 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: V ( ) Delete  
Name: JANUARY, KURT  
Address: 8937 IVEY ROAD  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D ( ) Delete  
Name: MCDEVITT, PHIL  
Address: 357 CROSSROAD LAKES DR  
City-St-Zip: PONTE VEDRA BCH, FL

Title: T ( ) Delete  
Name: HARRINGTON, JENNIFER  
Address: 11814 CATRAKEE DR  
City-St-Zip: JACKSONVILLE, FL 32223

Title: P ( ) Delete  
Name: HARRINGTON, JAMES G.  
Address: 11814 CATRAKEE DR  
City-St-Zip: JACKSONVILLE, FL 32223

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JENNIFER J HARRINGTON

T

04/22/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date