FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State*

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000012814 (6) 1. Corporation Name GUARANTY PEST CONTROL, INC.									
Principal Place of Business		Mailing Address				1 1001110 1 1 30 10301 0 341 00 111 30 11	H 01111 00181	4101E 1100H 131E1	ANDER BARRE NOBE
602 BEVERLY DRIVE Brandon Fl 33511		602 BEVERLY DRIVE Brandon FL 33511							
					3.	Date Incorporated or Qualified	3a. Da	ite of Last Re	port
2. Principal Plac	oo of Rusinges	2a. Mailing Address			4.	02/15/1995 FEI Number		TA	upplied For
21 6561 44TH STREET NORTH 26						9-3295405			lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			Certificate of Status Desired			Additional
22 SUITE 3008		27				Firsting Committee Financian			Required
City & State 23 PINELLAS PARK, FL		City & State			6.	Election Campaign Financing Trust Fund Contribution			May Be to Fees
Ζφ	Country	Zib	Cou	ntry	8.	This corporation has liability for	Intangible		
24 24665 50	39 25 PINELLAS	29	30				s 🚺 No		
	9. Name and Address of Curr	ent Registered Agent		81 Name		Name and Address of New	Registere	d Agent	
	m., , , ,								
HALL, ROY H				82 Street	t Address (P	.O. Box Number is Not Accepta	ible)		
6561 44TH STREET NORTH SUITE 3008				83					
PINELLAS PARK FL 34642				84 City				. 85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab							F	L 346	65-5939
familiar with SIGNATURE	of the provisions of sections corros of agent, or both, in the State of Fit, and accept the obligations of, Se Squature is safety printed name of registered ag-	etion 607.0505, Florida Statutes.			e required when n		DATE		
107.6	D	☐ DELETE	111	TLE	P,S,T			Change	X Addition
NAME	HALL, ROY H		12 N	ME					
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CHY-S1 Ziff	BRANDON FL 33511	FO DOLLETO		TY-ST-ZIP	 			Change	Addition
1016)		DELETE	2.1T 22 N					☐ Criange	L) Addition
NAMI STHEFF ADDRESS				ireet address					
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TITLE NAME		Doctor	6.1 6.2 N						- 000
STEEL LADDRESS				TREET ADDRESS	s				(AR)
CH1+51-209				ITY-ST-ZIP					ଫନ୍

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 contin, 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE SIGNATURE

2-26-96 813-526-8083

Date Control Proces 91