

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000020746

FILED
Apr 05, 2004
Secretary of State

Entity Name: THE PEST DETECTIVE, INC.

Current Principal Place of Business:

2121 CORPORATE SQUARE BLVD
#226
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

2121 CORPORATE SQUARE BLVD
#226
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 59-3301086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCKINDLES, NORMAN P JR.
2121 CORPORATE SQUARE BLVD
#226
JACKSONVILLE, FL 32216

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: P () Delete
Name: MCKINDLES, NORMAN P. JR
Address: 10523 ANCHORAGE COVE LANE
City-St-Zip: JACKSONVILLE, FL

Title: V () Delete
Name: MELLON, JOSEPH
Address: 8172 LADOGA AVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MCKINDLES, NORMAN P. JR PRES
Address: 707 CHERRY ST
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: V (X) Change () Addition
Name: MELLON, JOSEPH VP
Address: 8172 LADOGA AVE
City-St-Zip: JACKSONVILLE, FL 32217

Title: VP () Change (X) Addition
Name: MCKINDLES, SUSAN VP
Address: 707 CHERRY ST.
City-St-Zip: NEPTUNE BEACH, FL 32266 US

Title: VP () Change (X) Addition
Name: KILLEBREW, PAUL W VP
Address: 7800 POINTE MEADOWS DR-APT. 117
City-St-Zip: JACKSONVILLE, FL 32256 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: NORMAN MCKINDLES

PRES

04/05/2004

Electronic Signature of Signing Officer or Director

Date