## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION

ANNUAL REPORT Sandra B. Mortham Socretary of State 1998 DIVISION OF CORPORATIONS 98 SEP 24 PH 5 25 DOCUMENT # P95000077680 (3) WESTCOAST PEST CONTROL, INC. Principal Place of Business Mailing Address 9611 LONG MEADOW DRIVE 9611 LONG MEADOW DRIVE TAMPA FL 33615 TAMPA FL 33615 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/05/1995 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 59-3343800 Not Applicable 21 26 \$8.75 Additional Sulte, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip 8. This corporation owes or has paid the current year Intarigible Yes Personal Property Tax due June 30. 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name DONALDSON, GREG 9611 LONG MEADOW DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33615** 83 84 City 85 Zip Code 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 DATE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agont signature ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. 1.1 TITLE TITL F DELETE DONALDSON, BELINDA 1.2 NAME NAME 9611 LONG MEADOW DRIVE 1.3 STREET ADDRESS STREET ADDRESS 33619 TAMPA FL 1.4 CITY-SYZIP) CITY-ST-ZIP TITLE PTD DELETE 2 1 7 (TLE NAME DONALDSON, GREG 2.2 NAME 9611 LONG MEADOW DRIVE STREET ADDRESS 23 STREET ADDRESS 33615 TAMPA FL 24 CHTY-STŒP) CHTY-S1-ZIP DELETE Change Addition TITLE 3.1 THE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 4.1 TITLE Change Addition TITLE DELETE 1.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE

14. I 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 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.

DELETE

5.2 NAME

6.1 TITLE

6 2 NAME

5 3 STREET ADDRESS

5.4 CITY-ST-Z⊮P

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (5/98)

(0,0)0-

Change Addition



## WESTCOAST PEST CONTROL, INC.

**September 14, 1998** 

Florida Department of State Division of Corporations Annual Reports Filings P.O. Box 1500 Tallahassee, FL 32302-1500

To Whom It May Concern:

This letter is in reference to the annual report that is currently due for Westcoast Pest Control, Inc. As part owner, I am solely responsible for the administrative responsibilities for this company and due to unexpected circumstances, I was not able to complete and submit this form by the original due date. I spent five weeks in the hospital unexpectedly due to complications with my pregnancy. I was on complete bedrest and not allowed to sit or stand for any reason. My son then spent another seven weeks in the hospital as a result of his severe prematurity. And, based on the above circumstances, I would like to request the late fee of \$400.00 be waived. In addition to the mental stress of the above-mentioned situation, as I'm sure you can imagine, it has also had considerable financial impact.

I think your records will reflect that in the past this fee has consistently been paid on time. However, I am asking for leniency this year as a result of the above circumstances. I am hoping that the corporation will not be penalized for this oversight. I have enclosed a check for the original amount due. If this is not satisfactory or you have questions, please notify me immediately by telephone at (813) 880-7829.

Sincerely,

Belinda S. Donaldson

Blinda J. Donaldson