2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 13, 2004 8:00 am Secretary of State

DOCUMENT # P96000019630 1. Entity Name BUDGET TERMITE & PEST CONTROL, INC.					A sej	04-13-2004 9				
Principal Place of Business Mailing Address										
1260 S. JOHN YOUNG PKWY KISSIMMEE, FL 34741 US KISSIMMEE, FL 34741 US KISSIMMEE, FL 34741 US										
							TIP BETTAL HETTE LETTA		11	
2. Principal Place of Business 3601-F Commerce BIXO 3601-F Commerce				410						
Suite, Apt. #, etc. Suite, Apt. #, etc.			HERCE C.		03302004	Chg-P	CR2E03-	4 (10/03)		
City & State City & State					4. FEI Numb			Арі	olied For	
KISSI.	MMEE FL	KISSIMMEE,	166,FC Country			23570	ه شعمین=	No. 75 Add	Applicable	
341	41	34741		l		e of Status Desired	<u>با</u> لــا	ee Required		
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name						
MILES, R. STEPHEN JR 100 CHURCH ST KISSIMMEE, FL 34741			Street Ad	Street Address (P.O. Box Number is Not Acceptable)						
				FL Zip Code						
The above named entity submits this statement for the purpose of changing its registered of the purpose					ed agent, or b	oth, in the State of F		 ımiliar with,	and accept	
the obligations of registered agent.										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.										
10.	OFFICERS AND D		11.		ADDITIONS	CHANGES TO OF				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HOGAN, EDWARD J 3000 PINERIDGE CR KISSIMMEE, FL	∟ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	36 ST	17 CRO	SLEY AVE FL. 34	•	Change	☐ Addition	
TITLE	VSD	☐ Delete	TITLE			<u> </u>		Change	☐ Addition	
name Street address	HOGAN, KATHLEEN B 3000 PINERIDGE CR			36	617 CROSLEY AVE					
CITY-ST-ZIP	KISSIMMEE, FL		CITY-ST-ZIP	جكي	Cloud,	.E.L341				
TITLE NAME	VP WAYNE, ELOVER E	☐ Delete	TITLE NAME	GL.	OVER. U	DAYNE E		Change	Addition	
STREET ADDRESS CITY-ST-ZIP	1533 TRUMBULL ST. KISSIMMEE, FL 34744		STREET ADDRESS CITY-ST-ZIP	i 	•	•				
TITLE		☐ Delete	TITLE					Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP	<u> </u>			·			
TITLE NAME		☐ Delete	TITLE NAME					☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP							
TITLE		☐ Delete	TITLE		.,,		·	☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS							
CITY-ST-ZIP			CITY-ST-ZIP							

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Edward Hogan EDWARD J. HOGAN

467-933-8033