

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000011696

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** PEST SMART - PEST PROTECTION SERVICES, INC.

**Current Principal Place of Business:**

11102 LAUREL WALK ROAD  
WELLINGTON, FL 33449 US

**New Principal Place of Business:**

5144 3RD ROAD  
LAKE WORTH, FL 33467 US

**Current Mailing Address:**

11143 PACIFICA STREET  
WELLINGTON, FL 33449 US

**New Mailing Address:**

**FEI Number:** 65-0717790      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SWIATEK, THOMAS R  
11143 PACIFICA STREET  
WELLINGTON, FL 33449 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

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** MCELWAIN, ROCKY L  
**Address:** 11102 LAUREL WALK ROAD  
**City-St-Zip:** WELLINGTON, FL 33449 US

**Title:** VP  
**Name:** SWIATEK, THOMAS R  
**Address:** 11143 PACIFICA ST.  
**City-St-Zip:** WELLINGTON, FL 33449 US

I hereby 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 all other like empowered.

SIGNATURE: THOMAS R SWIATEK

VP

03/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date