

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000024380

**FILED**  
**May 11, 2004**  
**Secretary of State**

**Entity Name:** NEW APPROACH PEST MANAGMENT, INC.

**Current Principal Place of Business:**

1335-A NW ST. LUCIE WEST BLVD., STE 122  
PORT SAINT LUCIE, FL 34986

**New Principal Place of Business:**

906 ST. LUCIE WEST BLVD.  
#142  
PORT SAINT LUCIE, FL 34986

**Current Mailing Address:**

1335-A NW ST. LUCIE WEST BLVD., STE 122  
PORT SAINT LUCIE, FL 34986

**New Mailing Address:**

906 ST. LUCIE WEST BLVD.  
#142  
PORT SAINT LUCIE, FL 34986

**FEI Number:** 65-0816063

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMPSON, GARY  
1335-A NW ST. LUCIE WEST BLVD., SUITE 122  
PORT ST. LUCIE, FL 34986 US

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

THOMPSON, GARY  
906 ST. LUCIE WEST BLVD.  
#142  
PORT ST. LUCIE, FL 34986 US

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: \_\_\_\_\_

05/11/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: THOMPSON, GARY  
Address: 3238 CONSTELLATION ROAD  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D ( ) Delete  
Name: THOMPSON, LAURA  
Address: 3238 CONSTELLATION ROAD  
City-St-Zip: PORT ST. LUCIE, FL 34953

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: THOMPSON, GARY D  
Address: 3238 CONSTELLATION ROAD  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D (X) Change ( ) Addition  
Name: THOMPSON, LAURA A  
Address: 3238 CONSTELLATION ROAD  
City-St-Zip: PORT ST. LUCIE, FL 34953

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: GARY D. THOMPSON

D

05/11/2004

Electronic Signature of Signing Officer or Director

Date