

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000047812

FILED
Apr 27, 2007
Secretary of State

Entity Name: SOUTH FLORIDA PEST PROTECTION SERVICES, INC.

Current Principal Place of Business:

5416 2ND RD.
LAKE WORTH, FL 33467

New Principal Place of Business:

40442 EMERALDA ISLAND ROAD
LEESBURG, FL 34788 US

Current Mailing Address:

5416 2ND RD.
LAKE WORTH, FL 33467

New Mailing Address:

3130 NEW CAMPUS CT.
CUMMING, GA 30041 US

FEI Number: 65-0754788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOTTKE, THOMAS LEO JR.
5416 2ND ROAD
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

KOTTKE, THOMAS L JR.
40442 EMERALDA ISLAND ROAD
LEESBURG, FL 34788 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: THOMAS L. KOTTKE JR.

04/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KOTTKE, THOMAS LEO JR.
Address: 5416 2ND ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: FERNANDEZ, MICHAEL A JR.
Address: 135 BLACK OLIVE CRESCENT
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KOTTKE, THOMAS L JR.
Address: 40442 EMERALDA ISLAND ROAD
City-St-Zip: LEESBURG, FL 34788 US

Title: D (X) Change () Addition
Name: FERNANDEZ, MICHAEL A JR.
Address: 3130 NEW CAMPUS CT.
City-St-Zip: CUMMING, GA 30041 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: THOMAS L. KOTTKE JR.

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date