

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000047812

FILED
Apr 29, 2008
Secretary of State

Entity Name: SOUTH FLORIDA PEST PROTECTION SERVICES, INC.

Current Principal Place of Business:

40442 EMERALDA ISLAND ROAD
LEESBURG, FL 34788 US

New Principal Place of Business:

40445 EMERALDA ISLAND ROAD
LEESBURG, FL 34788 US

Current Mailing Address:

3130 NEW CAMPUS CT.
CUMMING, GA 30041 US

New Mailing Address:

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 L JR.
40442 EMERALDA ISLAND ROAD
LEESBURG, FL 34788 US

Name and Address of New Registered Agent:

KOTTKE, THOMAS L JR.
40445 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:

04/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KOTTKE, THOMAS L JR.
Address: 40445 EMERALDA ISLAND ROAD
City-St-Zip: LEESBURG, FL 34788 US

Title: VP (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.

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date