

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000083343

FILED  
May 19, 2010  
Secretary of State

Entity Name: R & S PEST CONTROL, INC.

**Current Principal Place of Business:**

181 WILLOW AVE  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

181 WILLOW AVE  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

FEI Number: 59-3477331

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SROFE, RANDOLPH H  
181 WILLOW AVE  
ALTAMONTE SPRINGS, FL 32714 US

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

SROFE, ALAN H  
155 PORTSTEWART DRIVE  
ORLANDO, FL 32828 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: ALAN H SROFE

05/19/2010

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: PD  
Name: SROFE, SHIRLEY TERESA  
Address: 181 WILLOW AVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: STD  
Name: SROFE, RANDOLPH H  
Address: 181 WILLOW AVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP  
Name: SROFE, ALAN H  
Address: 155 PORTSTEWART DRIVE  
City-St-Zip: ORLANDO, FL 32828

Title: VP  
Name: SROFE, BRANDON R  
Address: 6419 STARDUST LANE  
City-St-Zip: ORLANDO, FL 32818

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: ALAN H SROFE

VP

05/19/2010

Electronic Signature of Signing Officer or Director

Date