

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000083343

FILED  
Feb 24, 2011  
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:**

155 PORTSTEWART DRIVE  
ORLANDO, FL 32828

**Current Mailing Address:**

181 WILLOW AVE  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

155 PORTSTEWART DRIVE  
ORLANDO, FL 32828

FEI Number: 59-3477331

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

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

Title: STD  
Name: SROFE, PATRICIA L  
Address: 155 PORTSTEWART DRIVE  
City-St-Zip: ORLANDO, FL 32828

Title: VP  
Name: SROFE, BRANDON R  
Address: 2820 SOUTH LANE  
City-St-Zip: SANFORD, FL 32773

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

PD

02/24/2011

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

\_\_\_\_\_ Date