

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2000 8:00 am
Secretary of State

08-01-2000 90114 042 ***150.00

DOCUMENT # P97000084970

1. Entity Name
LLOYD'S BEST VALUE PEST CONTROL, INC.

Principal Place of Business Mailing Address

3245 N COURTENAY PKWY 1770 BAYBERRY COURT
 #40 MERRIT ISLAND FL 32953
 MERRIT ISLAND FL 32953

2. Principal Place of Business 3. Mailing Address

3245 N. Courtenay Pkwy 1770 Bayberry Ct
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 #40

City & State City & State

Merritt Island, FL Merritt Island

4. FEI Number 59-3475309 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75: Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LLOYD, GARY S
1770 BAYBERRY COURT
MERRIT ISLAND FL 32953

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. 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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	D LLOYD, GARY S	1770 BAYBERRY COURT	MERRIT ISLAND FL 32953	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gary S. Lloyd Date: 7/25/00 Daytime Phone #: 321-459-0019

7/25/00

B0103951

Attn: Andy:

Enclosed is the form and \$150⁰⁰ filing fee. As per our conversation, this letter informs that we did not receive the first notice, only this one. Thank you so much for your help in this matter.

Sincerely,
Jeri R. Lloyd