2006 FOR PROFIT CORPORATION

STREET ADDRESS CITY-ST-ZIP

SIGNATURE

changed, or on an attachment with an address, with all other like empowered

FILED **ANNUAL REPORT** Jan 17, 2006 08:00 AM **DOCUMENT # P97000100659 Secretary of State** PERF-A-LAWN PEST CONTROL, INC. Mailing Address Principal Place of Business 6186 126TH AVENUE NORTH 6186 126TH AVENUE NORTH LARGO, FL 33773 LARGO, FL 33773 01042006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied Fi 59-3482375 Not Applie \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NAPOLITANO, PETER A DO NOT WRITE 7617 LITTLE ROAD NEW PORT RICHEY, FL 34654 IN THIS SPACE 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. I am familiar with, and according to the purpose of changing its registered office or registered agent, or both, in the State of Florida. the obligations of registered agent Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 1100000389046 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 01/20/06-80027-018 150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS PTSD TOTLE WELTER, ROSE MARIE E NAME STREET ADDRESS 11209 BRAMBLELEAF WAY CITY-ST-ZIP HUDSON, FL 34667 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE TITLE LNAME SIRFET ADDRESS DITY-ST-ZIP TITLE STREET ADDRESS CITY -ST - ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under path; that I am an officer or directly 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 10 or Block