2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000018728

Entity Name: HERRINGTON TURF AND PEST SERVICES INC

4805 TARA WOODS DRIVE EAST

JACKSONVILLE, FL 32210

Address:

City-St-Zip:

FILED Jan 12, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
5860 TIMUQUNA RD, SUITE 3A JACKSONVILLE, FL 32210				4805 TARA WOODS DR. EAST JACKSONVILLE, FL 32210		
Current Mailing Address:				New Mailing Address:		
P O BOX 7114 JACKSONVILLE, FL 32210				P O BOX 7114 JACKSONVILLE, FL 32238		
FEI Number	: 59-3499890	FEI Number Applied For ()	FEI Number Not	: Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
4805 TAR	TON, HOMER A WOODS DF IVILLE, FL 32:	RIVEE				
	e named entity e of Florida.	submits this statement for the	purpose of chang	jing its registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electro	nic Signature of Registered A	gent		Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	HERRINGTON	OODS DRIVE EAST	Title: Name: Address City-St-	-	() Change () Addition	
Title:	VP (HERRINGTON) Delete BARBARA .I	Title: Name		() Change () Addition	

Address:

City-St-Zip:

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: HOMER T. HERRINGTON JR. P 01/12/2009