

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000054854

1. Entity Name

SOUTHERN PEST INSPECTION & EXTERMINATING, INC.

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90044 041 ***150.00

Principal Place of Business

717-A NORTHVIEW DR
JUPITER FL 33458

Mailing Address

717-A NORTHVIEW DR
JUPITER FL 33478-6585

2. Principal Place of Business

16500 130th Av. N.

Suite, Apt. #, etc.

3. Mailing Address

16500 130th Av. N.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Jup.ter, FL

City & State
Jup.ter, FL

4. FEI Number

65-0928017

Applied For

Not Applicable

Zip
33478

Country
USA

Zip
33478

Country
USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARION, LORRIE
4395 SW LEIGHTON FARM AVE
PALM CITY FL 34990

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

Lorrie Marion

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1 May 2000

DATE

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D. Gary T. Kelley**
STREET ADDRESS **717-A NORTHVIEW DR**
CITY-ST-ZIP **JUPITER FL 33458**

TITLE ☐ Change ☐ Addition
NAME **President**
STREET ADDRESS **Kelley, Gary T.**
CITY-ST-ZIP **16500 130th Av. N.**
Jupiter, FL 33478

TITLE ☐ Delete
NAME **Vice President**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Vice President**
STREET ADDRESS **Kathryn E. Kelley**
CITY-ST-ZIP **16500 130th Av. N.**
Jupiter, FL 33478

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 T. Kelley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 May 2000
Date

(561) 746-4171
Daytime Phone #

CR2E034 (9/99)