

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000055802

**FILED**  
**Jan 16, 2011**  
**Secretary of State**

**Entity Name:** GENTLEMAN JIM'S PEST CONTROL, INC.

**Current Principal Place of Business:**

4925 NW 94TH TER  
18C  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

4846 N. UNIVERSITY DR.  
#291  
LAUDERHILL, FL 33351

**New Mailing Address:**

**FEI Number:** 65-0929475

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERTS, JAMES A  
4925 NW 94TH TER  
18C  
SUNRISE, FL 33351 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: SDVT  
Name: ROBERTS, JAMES A  
Address: 4925 NW 94TH TER 18C  
City-St-Zip: SUNRISE, FL 33351

Title: P  
Name: ROBERTS, JAMES A  
Address: 4925 NW 94TH TER 18C  
City-St-Zip: SUNRISE, FL 33351

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: JAMES ROBERTS

PRES

01/16/2011

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

\_\_\_\_\_  
Date