

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S14961

1. Corporation Name

J.D. SMITH EXTERMINATORS OF SARASOTA, INC.

Principal Place of Business

Mailing Address

1345 University Parkway
Unit 5
SARASOTA, FLORIDA 34243

APPROVED
AND
FILED

95 MAY -1 PM 2:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800001479818

-05/09/95--01014--006

***200.00 ***200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

11-27-90

1999

4. FEI Number

Applied For

65-0207037

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,

Florida Statutes

☐ YES

☒ NO

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

John Bozmiski, Jr.
600 Bypass Drive
Suite 215
CLEARWATER, FL 34624

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of officer or director of the corporation (if applicable)

(NOTE: Registered Agent signature required when (re)appointing)

DATE

4-25-95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: PRESIDENT
NAME: JAMES D. SMITH, JR.
STREET ADDRESS: 8805 MOCCASIN SLough ROAD
CITY, ST, ZIP: INVERNESS, FL 34450

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

TAW

5-1-95

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

JAMES D. SMITH, JR. President
JAMES D. SMITH, JR. President

4-25-95

813-226-6090