2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S63292

Entity Name: ROYAL TERMITE & PEST CONTROL, INC.

FILED Jan 15, 2002 8:00 AM Secretary of State

10418 BLLOMINGDALE AVE RIVERVIEW, FL 33569

Current Mailing Address: New Mailing Address:

10418 BLLOMINGDALE AVE RIVERVIEW, FL 33569

FEI Number: 59-3072557 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:

ROBERTS, SHARON J.

9408 OAK STREET

RIVERVIEW, FL 33569

INTERNATIONAL TERMITE DETECTOR DOG ASSOCIA
9408 OAK STREET

RIVERVIEW, FL 33569

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: SHARON J ROBERTS 01/15/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title: ROBERTS, SHARON J., ROBERTS, SHARON J PRESIDE Name: Name: 9408 OAK STREET 9408 OAK STREET Address: Address: City-St-Zip: RIVERVIEW. FL City-St-Zip: RIVERVIEW, FL 33569

Title: STD () Delete Title: VP (X) Change () Addition Name: ROBERTS, PAUL D.. Name: STEIN, JIM VP

Name:ROBERTS, PAUL D.,Name:STEIN, JIM VPAddress:9408 OAK STREETAddress:127 W. COLLEGE AVE.City-St-Zip:RIVERVIEW, FLCity-St-Zip:PLEASANT GROUP, PA 16823

Title: () Delete Title: SECR () Change (X) Addition

 Name:
 Name:
 DEAN, TY SECRETA

 Address:
 Address:
 31739 PROGRESS RD.

 City-St-Zip:
 City-St-Zip:
 LEESBURG, FL 34748

Title: () Delete Title: TREA () Change (X) Addition
Name: BURTON, RICHARD D TREASUR

Address: Address: 4434 DAISY LANE
City-St-Zip: City-St-Zip: LAKELAND, FL 33810

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SHARON J ROBERTS PRES 01/15/2002