

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 13 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Merthart</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S73858** (0)  
1. Corporation Name  
**ACE PEST CONTROL OF SOUTHWEST FLORIDA, INC.**

Principal Place of Business <b>5860 ENTERPRISE PARKWAY FORT MYERS FL 33905 US</b>	Mailing Address <b>5860 ENTERPRISE PARKWAY FORT MYERS FL 33905 US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30		3. Date Incorporated or Qualified <b>08/16/1991</b>	
		4. FEI Number <b>65-0454685</b>		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>EDDY, ROBERT K. ESQ. 808 W. DELEON ST TAMPA FL 33606</b>		10. Name and Address of New Registered Agent 81 Name <b>ROCCO P. DILORENZO</b> 82 Street Address (P.O. Box Number is Not Acceptable) 83 <b>5860 ENTERPRISE PARKWAY.</b> 84 City <b>Fort Myers, FL</b> 85 Zip Code <b>33905</b>	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 Rocco DiLorenzo, Pres. 3/4/98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	PSD
NAME	DELORENZO, ROCCO	1.2 NAME	DILORENZO, ROCCO
STREET ADDRESS	5790 ENTERPRISE PKWY	1.3 STREET ADDRESS	5860 ENTERPRISE PKWY.
CITY-ST-ZIP	FT. MYERS FL	1.4 CITY-ST-ZIP	FORT MYERS, FL 33905
TITLE	VPT	2.1 TITLE	
NAME	STOVER, WILLIAM J.	2.2 NAME	
STREET ADDRESS	4213 ELBA PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	VALRICO FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	STOVER, CRAIG	3.2 NAME	
STREET ADDRESS	5790 ENTERPRISE PARKWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	DAY, STEVEN	4.2 NAME	
STREET ADDRESS	5790 ENTERPRISE PARKWAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	FORT MYERS FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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: Rocco DiLorenzo 3/4/98 694-1595

CR2E034 (10/97)