

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S92882

Entity Name: LINDSEY PEST CONTROL, INC.

FILED
Apr 23, 2005
Secretary of State

Current Principal Place of Business:

2134 HAINES STREET
JACKSONVILLE, FL 322064047

New Principal Place of Business:

Current Mailing Address:

2134 HAINES STREET
JACKSONVILLE, FL 322064047

New Mailing Address:

FEI Number: 59-3093997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGGETT, MARY JENNIFER
2134 HAINES STREET
JACKSONVILLE, FL 32206 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEGGETT, MARY JENNIF, ER
Address: 8116 CONCORD BLVD W
City-St-Zip: JACKSONVILLE, FL

Title: ST () Delete
Name: LEGGETT, JOAN CURRAN,
Address: 1047 DORCHESTER ST
City-St-Zip: JACKSONVILLE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: LEGGETT, JOAN CURRAN,
Address: 8128 CONCORD BLVD. W
City-St-Zip: JACKSONVILLE, FL

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: MARY JENNIFER LEGGETT

P

04/23/2005

Electronic Signature of Signing Officer or Director

Date