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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 16 1997 8:00am

Secretary of State

Change

Change

Addition

☐ Addition

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # V17391

1. Corporation Name

(6)

LEWIS PEST CONTROL, INC.

Principal Place of Business Mailing Address 604 6TH STREET N. P.O. BOX 1795 DUNDEE FL 33838 POST OFFICE BOX 1795 US DUNDEE FL 33838-1795									
		US	US			3. Date Incorporated or Qualified 02/27/1992	3a. Date of Last I 05/01/1996	Report	
2. Principal	Place of Business	2a. Mailing 26	2a. Mailing Address 26			4. FEI Number 59-3109515	Applied For Not Applicable		
Suite, Apt	. #, etc	Suite, A	Suite, Apt #, etc.			5. Certificate of Status Desired		Additional lequired	
City & Sta	ite	City & S	tate			Election Campaign Financing Trust Fund Contribution	, , , , , , , , , , , , , , , , , , ,	May Be to Fees	
Zip 24	Country 25	Ζφ 29	29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\sqrt{Y}\) No			
	9. Name and Address of Cu	rrent Registered Ag	ent			10. Name and Address of New Re	egistered Agent		
	vis, Jerry Vernon			81	Name				
604 - 6TH STREET NORTH DUNDEE FL 33838				62	Street A	Address (P.O. Box Number is Not Acceptable)			
				83					
				84	i,		FL `` `	Code	
11. Pursuan office or agent. I SIGNATURE	Jelner Weam	.0502 and 607.1508, state of Florida. Such bligations of, Section	ra Yo	the above thorized by da Statute: Registered Ap	23	orporation submits this statement for the oration's board of directors. I hereby acce	purpose of changing pt the appointment as	its registered s registered	
12.		AND DIRECTORS	· (NOIE.)	13.	on any materie	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	RS IN 12	
DITLE	PD		DELETE		T		☐ Change	Addition	
NAME	LEWIS, JERRY VERNON			1.2 NAME				'	
STREET ADDRESS	(1.3 STREET ADDRESS		•			
CITY-ST-ZIP	DUNDEE FL	···		1.4 CITY - 5	ST-ZIP			···	
1:TLE	ST	1	DELETE	2.1 TITLE	T		☐ Change	Addition	
NAME	LEWIS, SHARON L.			2.2 NAME	Į			i	
STREET ADDRESS				2.3 STAEET	ADDRESS			i	
CiTY-SI-7IP	DUNDEE FL		T	2 4 CITY-	ST-ZIP				
TITLE		L	DELETE	3.1 TITLE			L Change	Addition	

64 CITY-ST-ZIP

14. If do 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 Florida Statutes.

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

4. 2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

CHY-ST-ZiP

CHTY-SI-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

THE

NAME STREET ADDRESS

NAME

TITLE

NAME

LINE TO OR PRINTED NAME OF MANING OFFICER OR DIRECTOR VERNON LEWIS 4/24/1941/-325-960