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

PROFIT CORPORATION ANNUAL REPORT

1997

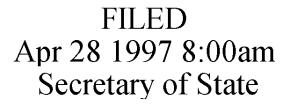


Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V26488 (9)

INTELLIGENT PEST MANAGEMENT CORPORATION





Principal Place 3763 ENTERPRI NAPLES FL 339 US	SE AVE.	3763 ENTER #20	Mailing Address 3763 ENTERPRISE AVE #20 NAPLES FL 34104-3807 US				(1881) SISSE SING SING SERVICES THE STREET STREET STREET STREET				
		US					3. Date Incorporated or Qualified 04/06/1992	3a. Date of Last Report 06/05/1996			
	lace of Business	2a. Mailing	Address				4. FEI Number 65-0341806			plied For	
Sulte, Apt.	# elc	26 Suite. A	Suite, Apt. #, etc.				SR 75 Additional				
22		27	├ ── '				5. Certificate of Status Desired Fee Required				
City & Stat	6	City &	City & State				6. Election Campaign Financing \$5.00 May Be				
23		[28]	· · · · · · · · · · · · · · · · · · ·				Trust Fund Contribution Added to Fees				
Zip 24	Country 25		Zip Cour 29 30			(y B. This corporation has liability for intangible tax under s			. 199.032,		
24	9. Name and Address of C		gent	1301			10. Name and Address of New Re				
	IGHLIN, WILLIAM C.		·		81	Name					
	WELLESLEY CIR UNIT 1				82	Street Add	dress (P.O. Box Number is Not Acceptab	le)			
NAP	LES FL 33999			-	83						
					84	City		FL	8 5 Zip (Code	
office or agent. I a	registered agent, or both, in the am familiar with, and accopt the Signature, typed or printed name of registor	State of Florida. Such obligations of, Section	n change was n 607.0505, Fi	authorized Iorida Stat	d by utes	the corpora	rporation submits this statement for the pation's board of directors. I hereby acception to the pation of the pation of the patients are stating. ADDITIONS/CHANGES TO OFFICE	DATE	itment as	registerea	
TITLE	P		DELETE	1111	īLE		P		Change	☐ Addition	
NAME	KERRY-W. COUGLIN			1.2 N/	AME		William C. Co 1696 WELLES LEY Naples FL 341	ughl	.i~	i	
STREET ADDRESS	1 150 RANKIN ST. 014 STONE MOUNTAIN CA			H		ADDRES\$	1696 WELLESLEY	Cir	·UN	ir 1	
CITY-ST-ZIP	STORE MOUNTAIN OA		DELETE	1 4 CI 2 1 TC		1- ZIP	Naples FL 341	16	Change	Addition	
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NAME				5.2 N						,	
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TITLE NAME	.		LJ DECCIE	6.2 N				_	,gu	taria - section	
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP						II-ZIP					
## 1 da	harman and the state of the sta	and the standard Main & the same	alaaa oo aa aa c	Contractor			ad in Caption 110 07/2Vi). Florida Ctatuta	a Lfurther o	artify that	the	

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Future receiving 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 algorithm with an angless.