2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

shment with an address, SANDRA NORRIS,

SIGNATURE:

V-PRES.

Apr 25, 2005 8:00 am Secretary of State DOCUMENT # V46361 1. Entity Name 04-25-2005 90220 047 ***150.00 TOWN & COUNTRY TERMITE & PEST CONTROL, INC. Mailing Address Principal Place of Business 3003 MAINE AVE P.O. BOX 668 EATON PARK FL 33840 EATON PARK FL 33840 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State Applied For 4. FEI Number 59-3134410 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NORRIS, SANDRA J. Street Address (P.O. Box Number is Not Acceptable) 3003 MAINE AVE P.O BOX 668 EATON FL 33840 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable, (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. **PSTD** V-S-T-D TITLE ☐ Delete TITLE XX Change ☐ Addition NORRIS, SANDRA NORRIS, SANDRA NAME NAME STREET ADDRESS 3003 MAINE AVE STREET ADDRESS 3003 MAINE AVENUE CITY-ST-ZIP EATON PARK FL 33840 CITY-ST-ZIP EATON PARK, FL. 33840 TITLE **VST** TITLE Delete XX Change ☐ Addition V-D NORRIS, SANDRA NAME NAME NORRIS, LAWRENCE STREET ADDRESS 3003 MAINE AVE STREET ADDRESS 3003 MAINE AVENUE CITY-ST-7/P EATON PARK FL CITY-ST-ZIP EATON PARK, FL. 33840 TITLE D ☐ Delete TITLE XX Change ☐ Addition NORRIS, MARK A. NAME NORRIS, LAWRENCE NAME 3003 MAINE AVENUE STREET ADDRESS 3003 MAINE AVE STREET ADDRESS 33840 CITY-ST-ZIP EATON PARK FL 33840 CITY-ST-ZIP EATON PARK, FL. VPD TITLE Delete TITLE ☐ Change Addition NORRIS, MARK A NAME 3003 MAINE AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP EATON PARK FL 33840 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7iP City-St-7iP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

APRIL 318 / 12005

Date

863-665-6417

Davtime Phone #