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

CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANN	1997		Secretar DIVISION OF C	y of State CORPORAT	IONS	Secreta	ary of	Sta	ale
DOCU I. Corporati	IMENT # V596	603	(3)	·					
TRUST	LAWN & PEST CONTR	ROL, INC.				 	TON BEBU BIBU BIBU	EDÐRÍ ÐAÐRÍ Í	BARKI KORI
Principal Place of Business Mailing Address									
8813 W ROBSON ST P.O. BOX 261495 TAMPA FL 33615 US US US US US									
		•				3. Date Incorporated or Qualifie 08/20/1992	d 3a. Date o		eport
-,	Place of Business	2a. Mailing 26	Address			4. FEI Number 59-3141032	-, <u></u>		plied For t Applicable
Suite, Apt	t #, etc.		pt. #, etc.	·		5. Certificate of Status Desired	\$		Additional
2		27						Fee Re	
City & Sta	(10)	City & S	ocate			6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Ζip	Country 25	Zıp		Counti	y	8. This corporation has liability the Florida Statutes	or intangible tax		199.032,
	9. Name and Address of	Current Registered Ag			ar	10. Name and Address of New	Registered Age	nt	
FARNSWORTH, MARYBETH					81 Name 82 Street Address (P.O. Box Number is Not Acceptable)				
	13 W ROBSON ST. MPA FL 33815					fress (P.O. Box Number is Not Accep	table)		
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				8	4 City		 _ 8	5 Zip (Code
11. Pursuan Office or	It to the provisions of Sections € registered agent, or both, in the	607.0502 and 607.1508, ne State of Florida, Such	Florida Statute	es, the abo	ve-named cor by the corpora	poration submits this statement for thation's board of directors. I hereby ac		anging its	s registered registered
	of to the provisions of Sections 6 registered agent, or both, in the am familiar with, and accept the Section 1995 of register as 1995 or professional accept the Section 1995 of register and 1995 of register accept the section 1995 of register accept the 1995 of reg					poration submits this statement for thation's board of directors. I hereby ac		anging its ment as	s registered registered
SIGNATURE	Stgruturo Typest or profed name of regi		e (NOTE	E Registered A	gent signature requ		e purpose of chacept the appoint	RECTOR	IS IN 12
SIGNATURE 12. IILE	Signature hypertor product name of region OFFICE	istured agent and title if applicable ERS AND DIRECTORS		E Registered A	gent signature requ	ired when reinstating)	e purpose of chacept the appoint		
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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 Block 13 if changed, or on an attachment with an address.

813 885-1909

FILED

Apr 28 1997 8:00am