I hereby 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 all other like empowered.

SIGNATURE: KAREN ARZT

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000098869

Entity Name: PEST PATROL OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

700 DYER BLVD. KISSIMMEE, FL 34741

Current Mailing Address:

P.O. BOX 420490 KISSIMMEE. FL 34742

FEI Number: 59-3485058

Name and Address of Current Registered Agent:

ARZT, KAREN 5075 BULLIS RD. ST. CLOUD, FL 34772 US

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

Officer/Director Detail :

Title	TS	Title	Р
Name	ARZT, JAMES M	Name	ARZT, KAREN L
Address	5075 BULLIS RD.	Address	5075 BULLIS RD.
City-State-Zip:	ST. CLOUD FL 34772	City-State-Zip:	ST. CLOUD FL 34742

PRESIDENT

Certificate of Status Desired: No

FILED Apr 17, 2017 Secretary of State CC1112004402

Date

04/17/2017

Date