2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2016
Secretary of State
CC6052170005

DOCUMENT# V07777

Entity Name: CURTIS PEST CONTROL, INC.

Current Principal Place of Business:

1702 LAKESIDE AVENUE
UNIT 6
SAINT AUGUSTINE, FL 32084

Current Mailing Address:

1702 LAKESIDE AVENUE
SUITE 6
SAINT AUGUSTINE, FL 32084 US

FEI Number: 59-3102598

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CURTIS, JAMES A
1702 LAKESIDE AVENUE
SUITE 6
SAINT AUGUSTINE, FL 32084 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: JAMES A. CURTIS 01/18/2016

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	VP
Name	CURTIS , JAMES K	Name	DISMORE, ALAN D
Address	4367 KINCARDINE DRIVE	Address	914 SAN REMO ROAD
City-State-Zip:	JACKSONVILLE FL 32257	City-State-Zip:	SAINT AUGUSTINE FL 32086
Title	TREASURER	Title	SECRETARY
Name	DISMORE, ALAN D	Name	NIERTH, JASON L
Address	914 SAN REMO ROAD	Address	263 MAJORCA ROAD
City-State-Zip:	SAINT AUGUSTINE FL 32086	City-State-Zip:	SAINT AUGUSTINE FL 32080
Title	OTHER	Title	OTHER
Name	CURTIS, JAMES A	Name	CURTIS, MARTA
Address	14 NELMAR AVENUE	Address	14 NELMAR AVENUE
City-State-Zip:	SAINT AUGUSTINE FL 32084	City-State-Zip:	SAINT AUGUSTINE FL 32084

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: JAMES A. CURTIS OWNER 01/18/2016

Electronic Signature of Signing Officer/Director Detail — Date