

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000122777

Entity Name: STUARTS PEST CONTROL LLC

Current Principal Place of Business:

4395 STATE ROAD 206 W
ELKTON, FL 32033

Current Mailing Address:

PO BOX 3033
ST. AUGUSTINE, FL 32085

FEI Number: 20-8110044

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLEE, STUART W
4395 STATE ROAD 206 W
ELKTON, FL 32033 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

Date

Authorized Person(s) Detail :

Title MGRM
Name COLEE, STUART W
Address 4395 STATE ROAD 206 W
City-State-Zip: ELKTON FL 32033

Title MGRM
Name COLEE, DEBORAH V
Address 4395 STATE ROAD 206 W
City-State-Zip: ELKTON FL 32033

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STUART W. COLEE

MGRM

04/14/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date