

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000001717

Entity Name: SOUTHWIND PEST & TERMITE OF CENTRAL FLORIDA LLC

Current Principal Place of Business:

4567 CAPITOL CIRCLE NW,
SUITE J
TALLAHASSEE, FL 32303

Current Mailing Address:

PO BOX 1306
BAINBRIDGE, GA 39818 US

FEI Number: 90-0923106

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

OLIVE, CAROLYN
4567 CAPITOL CIRCLE NW
SUITE J
TALLAHASSEE, FL 32303 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 SOUTHWIND PEST & TERMITE, LLC
Address P.O. BOX 1306
City-State-Zip: BAINBRIDGE GA 39818

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHARLES W WHITTAKER

MANAGING MEMBER

03/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date