

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000006787

Entity Name: OKOLONA PEST CONTROL, INC.

Current Principal Place of Business:

5800 POPLAR LEVEL ROAD
LOUISVILLE, KY 40228

Current Mailing Address:

2170 PIEDMONT ROAD NE
ATLANTA, GA 30324 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED AGENT GROUP INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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: JON-MICHAEL SANCHEZ, SPECIAL SECRETARY

04/25/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title ASSISTANT SECRETARY
Name WARD, JOSEPH
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

Title VP
Name BLAKE, DONNIE
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

Title VP
Name LEAVITT, STEVE
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

Title PRESIDENT
Name MILLS, KASSANDRA
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

Title VP
Name BLAKE, TERRY
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

Title PRESIDENT
Name MILLS, KEVIN
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

Title CEO
Name CONE, DENNIS
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

Title TREASURER
Name BIMMERMAN, JULIE
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

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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: JULIE BIMMERMAN

TREASURER, BY JON-
MICHAEL SANCHEZ,
ATTORNEY-IN-FACT

04/25/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT SECRETARY
Name CHANDLER, ELIZABETH
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

Title DIRECTOR
Name KRAUSE, KENNETH
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

Title DIRECTOR
Name GAHLHOFF JR., JERRY
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228

Title DIRECTOR
Name LEAVITT, STEVE
Address 5800 POPLAR LEVEL ROAD
City-State-Zip: LOUISVILLE KY 40228