

2019 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04761

Entity Name: TRULY NOLEN EXTERMINATING, INC.

Current Principal Place of Business:

432 S. WILLIAMS BLVD.
TUCSON, AZ 85711

FILED
May 23, 2019
Secretary of State
7370278395CC

Current Mailing Address:

432 S. WILLIAMS BLVD.
TUCSON, AZ 85711 US

FEI Number: 86-0169166

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Officer/Director Detail :

Title DIRECTOR OF OPERATIONAL
 ADMINISTRATION
Name SENNER, MICHELLE
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711

Title VP
Name MAHER, CHRIS
Address 770 TAMiami TRAIL
City-State-Zip: PORTCHARLOTTE FL 33953

Title CEO
Name NOLEN, STEVEN SPD
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711

Title VP
Name HARTLEY, ROBERT W
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711

Title COO
Name BELLET, JUSTIN VP
Address 2082 33RD STREET
City-State-Zip: ORLANDO FL 32839

Title VP
Name COHEN, DARLENE
Address 2929 N. 44TH STREET
 SUITE 320
City-State-Zip: PHOENIX AZ 85018

Title PRESIDENT
Name NOLEN JALLAD, SCARLETT S.
Address 2082 33RD ST.
City-State-Zip: ORLANDO FL 32839

Title VP
Name RINGLSTETTER, MARK
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711

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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: MARK RINGLSTETTER

VICE PRESIDENT

05/23/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CFO
Name WILD, MATT
Address 432 S. WILLIAMS BLVD.
City-State-Zip: TUCSON AZ 85711