## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #

1. Corporation Name

715072

(5)

## NORTHWEST FLORIDA VETERINARY MEDICAL SOCIETY, IN C.

Principal Place of Business

CORDOVA ANIMAL MEDICAL CENTER

2433 E. LANGLEY AVE

Mailing Address

CORDOVA ANIMAL MEDICAL CENTER 2433 E. LANGLEY AVE

**FILED** Feb 27 1997 8:00am Secretary of State



	ate of Last Report 02/26/1996 Applied For Not Applicable
21 Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.	<del>  </del>
21 Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.	<del></del>
22 3 15 1 (2) 1 DIVITE 101 10 10 10 10 10 10 10 10 10 10 10 10	\$8.75 Additional
and any that the state of the s	Fee Required
City & State  6. Election Campaign Financing	\$5.00 May Be
23 Coult Breeze 1 28 Country Trust Fund Contribution Country Zip. Country 8 This corporation has liability for intendible	Added to Fees
24 325 15 A 29 25 15 A 29 25 A Florida Statutes Yes	i tax under s. 199.032, <b>X</b> No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	
blease 1 81 Name Chery Shellon	
MORGAN, MICHAEL K  Centinue to 82 Street Address (P.O. Box Number is Not Acceptable)	
2433 E. LANGLEY AVE 12AC # 9 CO 3729 Gult Breeze 15e	WY
PENSACOLA FL 32504 Contract to 83	'
Cast and City 23-17 IS	85 Zip Code
Continuity.   Sult Dreeze FL	.   <del>  32</del>
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appragent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.	changing its registered
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.	Continent as registered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alguature required when reinstating)  DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
	Change Addition
NAME FLOWERS, CHUCK 12 NAME Wallace Belcher	
STREET ADDRESS 3800 CREIGHTON RD 1.3 STREET ADDRESS 711 N Fair field Dr	
CITY-ST-ZIP PENSACOLA FL 1.4 CITY-ST-ZIP Pensacola, F1 32506	
1,1,1,0,1,0,1	Change Addition
NAME SHELTON, CHERYL 22 NAME	
STREET ADDRESS 2727 GULF BREEZE PKWY. 2.3 STREET ADDRESS	
CITY-ST-ZIP GULD BREEZE FL 2.4011Y-ST-ZIP Gulf Breeze, F1 32561	
TOTE D STATE STATE D	Change
NAME MORGAN, MICHAEL 3.2 NAME Henry Escuriex STREET ADDRESS 2433 E. LANGLEY AVENUE 3.3 STREET ADDRESS 272 E Gulf Breeze Blewey	
STREET ADDRESS 2433 E. LANGLEY AVENUE 3.3 STREET ADDRESS 2727 Gulf Bruge Bruge	
CITY-ST-ZIP PENSAUULA FL 34.CITY-ST-ZIP GU H DTEE ZE F/ 3 2.5 C/	
TITLE D AT TITLE D	☐ Change ☐ Addition
NAME STEWART, JEANNEE STREET ADDRESS 10229 CHEMSTAND RD  4.2 NAME 4.3 STREET ADDRESS 470 Havy 29	
STREET ADDRESS 10229 CHEMSTAND RD 4.3 STREET ADDRESS 470 Huy 29	
CITY-ST-ZIP PENSACOLA FL 4.4 CITY-ST-ZIP Rensalota, F1 325 33	15.3.2.2.3.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1
D DELETE S. TITLE Sec/Tres. (3/T)	Change  Addition
NAME SUMMERLIN, DAVID 5.2 NAME	
STREE1 ADDRESS 4487 HIGHWAY 90  CITY-ST-ZIP MILTON FL  5.3 STREET ADDRESS 5.4 CITY-ST-ZIP PACE, FL	
CITY-SI-ZIP   MILTON FL   5.4 CITY-SI-ZIP   PACE, FL	
	Change Addition
TITLE D DELETE 6.1 TITLE	Vilarige L. J. Nacilion
TITLE D DELETE 6.1 TITLE  NAME GOSSMAN, TIM 6.2 NAME	Change Laboratori
TITLE D DELETE 6.1 TITLE	Vilange List Fullifoli

Information indicated on this annual report or supplemental annual report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.