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FILED

Mar 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H04511

(2)

1. Corporation Name

MARK L. GRISWOLD, D.V.M., P.A.



Principal Place of Business

5335 APLEGATE DR
SPRINGHILL FL 34606
US

Mailing Address

5335 APLEGATE DR
SPRINGHILL FL 34606-4504
US

2. Principal Place of Business

21 Same
Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Same
Suite, Apt. #, etc.

27 City & State

28 Zip Country

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3. Date Incorporated or Qualified

05/21/1984

3a. Date of Last Report

02/27/1996

4. FEI Number

59-2430407

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes No

9. Name and Address of Current Registered Agent

GRISWOLD, ARLENE L.
5587 CACTUS CIRCLE
SPRING HILL FL 34606

10. Name and Address of New Registered Agent

81 Name

Same

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
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 appointment as registered
agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person named in the above-named corporation (handwritten signature)

(NOTE: Registered Agent signature required when reinstating)

DATE

3-11-97

12. OFFICERS AND DIRECTORS

12.1 PSD
NAME GRISWOLD, MARK L.
STREET ADDRESS 1338 PINEHURST DR
CITY, ST, ZIP SPRING HILL FL

DELETE

12.2

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE Change Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, ST, ZIP

21 TITLE Change Addition

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

31 TITLE Change Addition

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE Change Addition

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE Change Addition

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE Change Addition

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Printed Name

3-11-97

352-683620-8

CR2E034 (9/96)