

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J20010

FILED
Apr 22, 2005
Secretary of State

Entity Name: WEST ORANGE VETERINARY HOSPITAL, INC.

Current Principal Place of Business:

1350 S. VINELAND RD
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

1350 S. VINELAND RD
WINTER GARDEN, FL 34787

New Mailing Address:

FEI Number: 59-2775696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, ROBERT
1350 S. VINELAND RD.
WINTER GARDEN, FL 32787 US

Name and Address of New Registered Agent:

STEVENS, ROBERT
1350 S. VINELAND RD.
WINTER GARDEN, FL 34787 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

04/22/2005

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STEVENS, ROBERT
Address: 1350 S. VINELAND RD.
City-St-Zip: WINTER GARDEN, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: STEVENS, ROBERT
Address: 1350 S. VINELAND RD.
City-St-Zip: WINTER GARDEN, FL 34787

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT O STEVENS DVM

Electronic Signature of Signing Officer or Director

PD

04/22/2005

Date