

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L43456** (7)

1. Corporation Name
GENE J. HILL, D.V.M., P.A.



Principal Place of Business Mailing Address
% GENE J HILL
1875 NW 80TH AVE
OCALA FL 34482

3. Date Incorporated or Qualified **01/16/1990** 3a. Date of Last Report **04/24/1995**
4. FEI Number **59-2997868** 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 24 Country 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent
HILL, GENE J.
1875 NW 80TH AVE
OCALA FL 34482

10. Name and Address of New Registered Agent
81 Name
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 602.0505, Florida Statutes.

SIGNATURE *Gene J. Hill* President DATE **4-30-96**

12. OFFICERS AND DIRECTORS
TITLE DELETE
NAME **D HILL, GENE J**
STREET ADDRESS **1875 NW 80TH AVE**
CITY-STATE-ZIP **OCALA FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE Change Addition
2. NAME
3. STREET ADDRESS
4. CITY-STATE-ZIP
5. TITLE Change Addition
6. NAME
7. STREET ADDRESS
8. CITY-STATE-ZIP
9. TITLE Change Addition
10. NAME
11. STREET ADDRESS
12. CITY-STATE-ZIP
13. TITLE Change Addition
14. NAME
15. STREET ADDRESS
16. CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(j)(k), Florida Statutes. I further certify that the 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Gene J. Hill* DATE: **4-30-96** PHONE: **352-843-2667**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Gene J. Hill DVM President

CR2E034 (12/95)