



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90426 020 ****61.25

DOCUMENT # N99000006137					
1. Entity Name FLORIDA VETERINARY MEDICINE FACULTY ASSOCIATION, INC.					
Principal Place of Business 2015 S.W. 16TH AVE. GAINESVILLE, FL 32610			Mailing Address P.O. 100125 GAINESVILLE, FL 32610-0125		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-3609357	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BERNARD, PAMELA J 123 TIGERT HALL P.O. BOX 113125 GAINESVILLE, FL 32611-3125				Name Street Address (P.O. Box Number is Not Acceptable) City	
				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOMPSON, JAMES		NAME	HOFFSIS, GLEN F	
STREET ADDRESS	2015 SW 16TH AVE		STREET ADDRESS	2015 SW 16TH AVE	
CITY-ST-ZIP	GAINESVILLE, FL 32610		CITY-ST-ZIP	GAINESVILLE, FL 32610	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARRETT, DOUGLAS L		NAME		
STREET ADDRESS	1600 SW ARCHER RD.		STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE, FL 32610		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAVEN, JOHN		NAME		
STREET ADDRESS	2015 SW 16TH AVE		STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE, FL 32610		CITY-ST-ZIP		
TITLE	EXVD	<input checked="" type="checkbox"/> Delete	TITLE	EXVD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GRONWELL, RONALD R		NAME	THOMPSON, JAMES	
STREET ADDRESS	2015 S.W. 16TH AVE.		STREET ADDRESS	2015 SW 16TH AVE	
CITY-ST-ZIP	GAINESVILLE, FL 32610		CITY-ST-ZIP	GAINESVILLE, FL 32610	
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OWEN, RAE		NAME		
STREET ADDRESS	2015 SW 16TH AVE.		STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE, FL 32610		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POPPELL, JOHN E		NAME	LEVY, JULIE K	
STREET ADDRESS	204 TIGERT HALL		STREET ADDRESS	2015 SW 16TH AVE	
CITY-ST-ZIP	GAINESVILLE, FL 326113100		CITY-ST-ZIP	GAINESVILLE, FL 32610	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida: indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			Date: 4/27/07		Daytime Phone #: 352 392 4700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #

40089907



04272007 Chg-NP CR2E037 (12/06)

FL Zip Code

← Add Julie Levy as the 7th officer/director.