

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G50749

Entity Name: SIMMONS' SAND LAKE ANIMAL CLINIC, P.A.

Current Principal Place of Business:

C/O JON NASH
8932 S APOPKA-VINELAND RD
ORLANDO, FL 32836-5721

Current Mailing Address:

C/O JON NASH
8932 S APOPKA-VINELAND RD
ORLANDO, FL 32836-5721

FEI Number: 59-2329977

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NASH, JON E
8932 SOUTH APOPKA-VINELAND ROAD
ORLANDO, FL 32836 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

Date

Officer/Director Detail :

Title PRESIDENT
Name NASH, JON E
Address C/O JON NASH
 8932 S APOPKA-VINELAND RD
City-State-Zip: ORLANDO FL 32836-5721

I hereby 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 all other like empowered.

SIGNATURE: JON NASH

OWNER

02/01/2017

Electronic Signature of Signing Officer/Director Detail

Date