

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L43456

**Entity Name:** GENE J. HILL, D.V.M., P.A.

**Current Principal Place of Business:**

95 SW 80TH AVE  
OCALA, FL 34481

**Current Mailing Address:**

GENE J HILL  
PO BOX 770659  
OCALA, FL 34477

**FEI Number:** 59-2997868

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HILL, GENE J.  
95 SW 80TH AVE  
OCALA, FL 34481 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            OWNER  
Name            HILL, GENE J DVM  
Address        GENE J HILL  
                  PO BOX 770659  
City-State-Zip: Ocala FL 34477

*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:** GENE J HILL DVM

**OFFICER**

**04/28/2014**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date